

# **California Department of Corrections and Rehabilitation**

## **Office of Audits and Compliance**



## **Operational Peer Review**

**Chuckawalla Valley State Prison**

**February 25, 2008 - March 7, 2008**

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# OFFICE OF AUDITS AND COMPLIANCE

## CHUCKAWALLA VALLEY STATE PRISION

### EXECUTIVE SUMMARY

The Office of Audits and Compliance, in conjunction with various teams, conducted an audit of the Security/Escape Prevention, Administrative Segregation and Due Process, Business Services, Information Security, Inmate Education Programs, Inmate Appeals, [REDACTED], Administrative Segregation Bed Utilization, and Radio Communication, [REDACTED], Case Records, and [REDACTED] at Chuckawalla Valley State Prison (CVSP) during the period of March 10 through March 21, 2008. The purpose of the audit was to determine CVSP's compliance with State, federal, and departmental rules, regulations, policies, and procedures.

Preliminary audit reports were prepared for each of the audited areas. This executive summary identifies the significant issues identified in each of the preliminary reports. For more information on the areas of interest, please see the detail preliminary report. The Office of Audits and Compliance requested that CVSP provide a corrective action plan (CAP) 30-days from the date of the Preliminary report.

A summary of the significant issues is as follows:

#### Administrative Segregation and Due Process

- **Quarterly Fire Drills:** Of the 12 required fire drills, 8 (67 percent) were conducted.
- **Post Order—Staff:** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the Administrative Segregation Unit (ASU) read and understand their post order upon assuming their post.

#### Business Services

##### **Corrective Action not Taken on Five Prior Findings:**

- The Material Safety Data Sheets (MSDS) are not always updated. The Audits Branch (AB) noted this issue in the Garage, Vocational Auto, Painting, Carpentry, Mill and Cabinet, and the Central Kitchen. Department Operations Manual (DOM), Section 52030.
- There are two containers with hazardous waste located in the Vocational Auto Body shop that have been stored longer than one year. California Code of Regulations (CCR), Title 22.
- Of the 35 Inmate Timecards (CDC 1697) reviewed, 34 had deficiencies. For example, "S" time was not properly documented; transfer-in, Daily Movement Sheet (DMS) numbers and time worked were missing. CCR, Title 15, Section 3045.
- Of the 35 CDC 1697s reviewed, 34 had deficiencies. For example, "S" time was not properly documented; transfer-in, Daily Movement Sheet (DMS) numbers and time worked were missing. CCR, Title 15, Section 3045.

- The non-drug medical warehouse has the following deficiencies:
  1. Separation of duties is inadequate.
  2. Inventory reconciliations are not performed.
  3. Stock records are not maintained.
  4. There are no written desk procedures.
  5. Shelves are not marked with stock numbers.
 SAM, Section 20050 and DOM, Section 22030.
- Possible contamination of food can occur due to the following deficiencies:
  - There was evidence of rodent droppings under the pot and pan racks in the Central Kitchen dishwashing area. California Retail Food Code (CRFC), Article 6.
  - The automatic door closer for the inmate restroom in the Central Kitchen is broken. In addition, there were no paper towels. CRFC, Article 2.
  - Eggs were stored over prepared ready to eat food in reach-in refrigerators in the Central Kosher and A Yard Kitchens. CRFC, Article 1.
  - Several 140-quart Hobart mixing bowls and 32-gallon blue plastic containers were observed with standing water in them. CRFC, Chapter 5.

## **Information Security**

### **Staff Computing Environment:**

- Use Agreements are not on file.
- Annual Self Certification of Information Security Awareness and Confidentiality forms are not on file.
- Information security training is not current.
- Network access authorization is not on file.
- Physical locations of CPUs do not agree with the inventory records.
- Staff CPUs are not labeled "No Inmate Access".
- Anti virus updates are not current.
- Security patches are not current.

### **Inmate Computing Environment (Education, Library, Clerks):**

- Physical locations of CPUs do not agree with the inventory records.
- CPUs are not labeled as inmate computers.
- Anti virus updates are not current.
- Inmate monitors are not visible to the supervisor.
- Portable media is not controlled.
- Telecommunications access is not restricted.
- Operating system access is not restricted.
- Printer access is not restricted.

## **Inmate Education Programs**

**Academic Education:** None of the teachers give elective credits to those students that earn them. They also did not know about the California Department of Corrections and Rehabilitation approved high school curricula and diploma program.

The Test of Adult Basic Education testing materials are not secured in a locked cabinet as required in the mandatory standards. Test materials are on all the yards in “Test Depots” in the vocational education areas and in academic classrooms. The teacher checks out test materials and checks them back in. The test materials were on an open shelf in one teacher’s office.

**Vocation Education:** The Office Services teacher on D yard uses the older curriculum to teach typing and ten key, etc., because computers for the program do not have the required Office Services and Related Technology software installed. The current Office Services and Related Technology curriculum is totally computer driven, but only five computers have been loaded with required software. The required software needs to be installed on the remaining computers so that students can receive appropriate required training.

Only one of the Office Services Teachers has received Microsoft training to certify their students. Also the testing computers for Microsoft have not been loaded with the test software and installed in the Office Services classrooms. The Automotive Service Excellence certification is not being utilized for the automotive trades. There is a lack of material to provide training for the American Welding Society certification.

Teachers were unaware they could issue elective credits.

**Library/Law Library:** The Senior Librarian sent a letter to all Education staff requesting a copy of their textbooks for the libraries. About 25 percent responded. The textbooks are kept in the main library and can be requested by satellite libraries for inmate check-out. The Senior Librarian plans to send another letter to get more textbook copies.

Not all exits are clearly marked and not all evacuation plans are up to date.

### **Inmate Appeals**

**Preparation of Appeals:** The dates on the appeal do not correspond with the dates on the Inmate Appeals Tracking System (IATS).

**Training:** There is no evidence that the Appeals Process training is not provided to new supervisors during Supervisor’s Orientation. There is no updated Inmate Appeals lesson plan, which identifies recent change in the Department policy.

[REDACTED]

[REDACTED]

### **Administrative Segregation Bed Utilization**

#### **General Administrative Segregation Unit (ASU) Case Processing Times**

**Initial Placement in ASU to Classification Services Review (CSR) Review:** The average time from the initial Institutional Classification Committee (ICC) referral for CSR

Review to the actual CSR review ranged from 11 days to 76 days. The average time is 21 days. The expectation is within 30 days of the Classification committee referral.

**Post-Hearing Processing Timelines:**

Hearing to Facility Captain Review: Time from the date of the Rules Violation Review (RVR) hearing to the date the RVR was audited by the Facility Captain ranged from 1 day to 22 days. The average time is 7 days. The expectation is within 5 working days.

Facility Captain to Chief Disciplinary Officer Review: Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from 1 day to 15 days. The average time is 4 days. The expectation is within 3 working days.

Chief Disciplinary Officer (CDO) to ICC review: Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from 10 days to 72 days. The average time is 25.5 days. The expectation is within 14 days.

**Incident Reporting Processing.**

Incident Date to ISU Receipt of Incident Report: Date from incident occurrence to the date ISU received the Incident Report ranged from 0 days to 27 days. The average time is 12 days. The expectation is within 7 calendar days.

ISU Receipt of Incident Report to Referral to the District Attorney (DA)/ISU Screenout: Date from ISU receipt of Incident Report to referral to the DA or ISU screen out ranged from 6 days to 36 days. The average time is 19 days. The expectation is not to exceed 5 working days.

**Radio Communication**

Recommendations are to continue normal practices as CVSP has no issues with usage of the 800 MHz Trunked Radio System and all CVSP staff is following all required Public Safety Standards.

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### **Case Records**

**Holds, Warrants and Detainers:** The CDC 850 are not reflecting the time the hold, warrant, or detainer was entered into Offender Base Information System (OBIS). In reviewing the desk procedures and interviewing staff regarding the Time Server Log, it was revealed that they no longer maintained a Time Server Log.

**Warden's Checkout Order (CDC161):** Three cases listed the Parole Unit and the County incorrect on the CDC 161 and in OBIS. There was a minor problem identified where staff is not utilizing the most current information supplied from Central Office OBIS to identify the most current Parole Unit and the County covered by each unit.

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CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION  
AND  
DUE PROCESS

CHUCKAWALLA VALLEY STATE PRISON

FEBRUARY 25 THROUGH MARCH 7, 2008



**PRELIMINARY**

CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

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## **Review of Administrative Segregation and Due Process**

### **Chuckawalla Valley State Prison**

#### **INTRODUCTION**

This review of Administrative Segregation Unit (ASU) operations and due process provisions at the Chuckawalla Valley State Prison (CVSP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Audits and Compliance, between the dates of February 25-29, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation's (CDCR) Department Operations Manual (DOM), CDCR's Use of Force Policy, Administrative Bulletins (AB) 95/3R and 99/03, and Information Bulletins (IB) as the primary sources of operational standards. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** were used in this review as a benchmark for litigation avoidance.

This review was conducted by Tony Alleva, Facility Captain; Dave Stark, Correctional Counselor (CC) II; Michael Brown, Correctional Lieutenant; Al Sisneros, Correctional Lieutenant; and Nancy Fitzpatrick, Associate Governmental Program Analyst, of the CPRB.

The review consisted of an on-site inspection, interviews with staff and inmates, reviews of procedures and other documentation, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations and court-established standards.

Each area was reviewed by a minimum of two primary reviewers and cross-verified by other members of the team as possible. Overall, findings presented in the attached report represent the consensus of the entire review team.

## **Review of Administrative Segregation and Due Process**

### **Chuckawalla Valley State Prison**

#### **SCOPE AND METHODOLOGY**

The CPRB conducted an on-site review at CVSP during the period of February 25-29, 2008. The purpose of this review was to assess the level of compliance with established State regulations and court-established standards in the areas of ASU operations and due process provisions. This review and the attached findings represent the formal audit of CVSP's compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to CVSP's staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process.

For the purposes of this review, facilities were toured by members of the review team, cell and tier inspections were conducted in the units, and randomly selected inmates were informally interviewed based upon their interest and willingness to talk with the CPRB.

Throughout the tour, on-duty staff at all levels (medical, counseling, management, administration, custody, and non-custody) were interviewed regarding current practices.

Random samples of 30 central files were reviewed. Utilizing "point-in-time" methodology, files were evaluated against all administrative requirements pertaining to the documents contained in those files.

## Review of Administrative Segregation and Due Process

### Chuckawalla Valley State Prison

#### EXECUTIVE SUMMARY

During this formal review of compliance with State regulations and court-established standards regarding ASU operations and due process provisions at CVSP, the Facility was found to be in compliance with 59 (88 percent) of the 67 ratable areas. Three areas were found to be not ratable during this review.

Areas of concern were found as follows:

- **Exercise.** No yard group designation is receiving the required ten hours of outdoor exercise per week as required.
- **The Inmate Segregation Profile (CDC 114-A1) is Updated Every 90 Days.** The review revealed that in a random sample of 15 CDC 114-A1s reviewed, 3 were not ratable as the inmate had not been on ASU status for a period of time long enough to require a 90-day update. Of the 12 ratable CDC 114 A1s, 10 (83 percent) were updated as required. The two remaining records were not updated as required.
- **Quarterly Fire Drills.** Of the 12 required fire drills, 8 (67 percent) were conducted.
- **Administrative Review.** Of the 30 records reviewed, 23 (77 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in ASU. Of the 7 remaining records, 5 documented a late review by a Captain (1 to 4 days late) and 2 records documented the review was conducted by an acting Captain with a late counter signature by an Associate Warden (1 day late).
- **Need for Witnesses on the Administrative Segregation Unit Placement Notice (CDC 114-D).** Of the 30 records reviewed, 25 (83 percent) contained documentation regarding the need for witnesses. The 5 remaining records left this section blank.
- **Inmate Waiver.** Of the 30 records reviewed, 25 (83 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 5 remaining records documented a waiver of the 72-hour time period absent a signature by the inmate.
- **Post Order—Signature.** The review revealed that there are 33 identified staff who are assigned to 20 ASU posts. Of the 40 required signatures, 34 (85 percent) were present acknowledging the understanding of the post orders.

- **Post Order—Staff.** The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the ASU read and understand their post order upon assuming their post.

A complete description of these finding areas may be found in the narrative section of this report.

## Review of Administrative Segregation and Due Process

### Chuckawalla Valley State Prison

#### COMPLIANCE RATING BY SUBJECT AREA

SECTION REVIEWED	NO. OF ITEMS REVIEWED	NO. IN COMPLIANCE	SECTION SCORE
Conditions of Segregated Housing	30	27	90%
Due Process	22	19	86%
Administration	10	8	80%
Use of Force	8	8	100%

## Review of Administrative Segregation and Due Process

### Chuckawalla Valley State Prison

#### SUMMARY CHART (SYMBOL DEFINITIONS)

The following chart represents individual review findings in relation to the CCR, Title 15, DOM, PC, and ABs. In addition, applicable court-ordered minimum standards established under **Toussaint v. Gomez** are being used in this review as a benchmark for litigation avoidance.

Each of the items is rated as to whether or not the Institution is in compliance. The chart utilizes the following symbols to denote compliance ratings:

SYMBOL	DEFINITION
<b>Compliance (C)</b>	The requirement is being met.
<b>Partial Compliance (P/C)</b>	The institution is clearly attempting to meet the requirement, but significant discrepancies currently exist.
<b>Noncompliance (N/C)</b>	The institution is clearly not meeting the requirement.
<b>Not Applicable (N/A)</b>	Responsibility for compliance in this area is not within the authority of this institution.
<b>Not Ratable (N/R)</b>	No measurable instances.

At the end of the chart is a Comparative Statistical Summary Chart of Review Findings. This summary presents a mathematical breakdown of compliance by total items and percentages (%).



## Review of Administrative Segregation and Due Process

### Chuckawalla Valley State Prison

#### SUMMARY CHART

REVIEW STANDARD	REVIEW FINDING 12/06	REVIEW FINDING 2/08	PAGE NO.
<b>I. CONDITIONS OF SEGREGATED HOUSING</b>			
1. Living Conditions.	C	C	1
a. Housekeeping and Maintenance.	C	C	2
b. Vector Control.	C	C	2
2. Restrictions.	C	C	3
3. Clothing.	C	C	3
4. Meals.	C	C	4
5. Mail.	C	C	4
6. Visits.	C	C	5
7. Personal Cleanliness.			
a. Showering.	C	C	5
b. Haircuts.	C	C	6
c. Laundry Items.	C	C	6
8. Exercise.	N/C	N/C	6
9. Reading Material.	C	C	7
10. Rule Changes.	C	C	7

REVIEW STANDARD	REVIEW FINDING 12/06	REVIEW FINDING 2/08	PAGE NO.
11. Telephones.	C	<b>C</b>	8
12. Institution Programs and Services.	C	<b>C</b>	9
13. Visitation and Inspection.	C	<b>C</b>	9
a. Medical Attention.	C	<b>C</b>	10
14. Management Cells.			
a. Placement.	N/R	<b>N/R</b>	10
b. Reporting.	N/R	<b>N/R</b>	11
c. Transfer.	N/R	<b>N/R</b>	11
15. Access to the Courts.	C	<b>C</b>	12
16. Isolation Log Book (CDC 114).	C	<b>C</b>	12
17. Isolation/Segregation Record (CDC 114-A).			
a. All significant information documented.	C	<b>C</b>	13
b. The CDC 114-A1 notes yard group designation.	P/C	<b>C</b>	13
c. The CDC 114-A1 notes special information.	C	<b>C</b>	13
d. The CDC 114-A1 is updated every 90 days.	N/C	<b>P/C</b>	14
18. Safety.			
a. Fire Safety.	C	<b>C</b>	14
b. Quarterly Fire Drills.	P/C	<b>P/C</b>	15
c. Documentation.	C	<b>C</b>	16

REVIEW STANDARD	REVIEW FINDING 12/06	REVIEW FINDING 2/08	PAGE NO.
<b>II. DUE PROCESS</b>			
1. Authority.	C	C	16
2. Written Notice.	C	C	17
3. Receipt of the CDC 114-D.	C	C	17
4. Confidential Material.	C	C	18
5. Review.	P/C	P/C	18
a. Staff Assistance.	C	C	19
b. Witnesses.	P/C	P/C	19
c. Inmate Waiver of Time Limitations.	C	P/C	20
d. Hearing Time Constraints.	C	C	20
e. Decision.	C	C	20
6. Hearing Within 10 Days.	C	C	21
a. Determinations documented on the Classification Chrono Form (CDC 128-G).	C	C	21
b. Hearing Date.	C	C	22
c. Inmate Presence.	C	C	22
d. Hearing Officer.	C	C	23
e. Staff Assistant (SA)/Investigative Employee (IE) on CDC 128-G.	C	C	23
f. Witnesses on CDC 128-G.	C	C	24
g. The CDC 128-G notes yard group designation.	C	C	24

REVIEW STANDARD	REVIEW FINDING 12/06	REVIEW FINDING 2/08	PAGE NO.
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h. Cell Status.	C	C	24
i. Participation.	C	C	25
7. Classification Review.	C	C	25
8. Classification Staff Representative (CSR) Review.	C	C	26

<b>III. ADMINISTRATION</b>			
1. Training.	C	C	26
2. The Institution Classification Committee (ICC).	C	C	27
3. Record of Disciplinary.	C	C	28
4. Post Orders-Firearms.	C	C	28
5. Post Order-Job-Site.	P/C	C	29
6. Post Order-Staff.	P/C	P/C	29
a. Signing of Post Orders.	P/C	P/C	30
b. Supervisor Inspection.	C	C	30
c. Post Order-Acknowledgment.	C	C	31
7. Protective Vests.	C	C	31

REVIEW STANDARD	REVIEW FINDING 12/06	REVIEW FINDING 2/08	PAGE NO.
<b>IV. USE OF FORCE</b>			
1. Extraction.	C	<b>C</b>	32
a. Videotape Recording.	C	<b>C</b>	33
b. Prior authorization for use of Oleoresin Capsicum (OC).	C	<b>C</b>	33
2. Use of OC.	C	<b>C</b>	34
3. Decontamination.	C	<b>C</b>	34
4. Use of Force/Reasonable Force.	C	<b>C</b>	35
5. Reporting Force.	C	<b>C</b>	35
6. Reviewing Force.	P/C	<b>C</b>	36

## **Review of Administrative Segregation and Due Process**

### **Chuckawalla Valley State Prison**

#### **COMPARATIVE STATISTICAL SUMMARY CHART**

#### **DECEMBER 2006—FEBRUARY 2008 REVIEW FINDINGS**

<b>RATING</b>	<b>TOTAL 12/06</b>	<b>RATING % 12/06</b>	<b>TOTAL 2/08</b>	<b>RATING % 2/08</b>
<b>COMPLIANCE</b>	57	85%	<b>59</b>	<b>88%</b>
<b>PARTIAL COMPLIANCE</b>	8	12%	<b>7</b>	<b>11%</b>
<b>NONCOMPLIANCE</b>	2	3%	<b>1</b>	<b>1%</b>
<b>NOT APPLICABLE</b>				
<b>NOT RATABLE</b>	3		<b>3</b>	
<b>TOTAL</b>	70	100%	<b>70</b>	<b>100%</b>

## **Formal Review of Administrative Segregation and Due Process**

### **Chuckawalla Valley State Prison**

#### **SUMMARY OF FACILITIES REVIEWED**

The CVSP includes 200 ASU beds in this Level I and II Facility. At the time of this review, the Facility was housing 162 ASU inmates, 39 of which are on overflow status from Ironwood State Prison.

For the purposes of the review, the CPRB toured the ASUs, reviewed unit records, and interviewed unit staff to determine the degree of compliance with established departmental policy, procedures, guidelines, and relevant court-established standards.

#### **I**

#### **CONDITIONS OF SEGREGATED HOUSING**

1. **Living Conditions.** In keeping with the special purpose of a segregated housing unit, and with the degree of security, control, and supervision required to serve that purpose, the physical facilities of special purpose segregated housing will approximate those of the general population.  
**(Authority cited: PC, Sections 2084, 5054, and 5058. Reference: CCR, Title 15, Sections 3343(a) and 3345; and DOM, Section 52080.33.)**

#### **Findings**

#### **COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that the physical facilities of CVSP's ASU approximate those of the general population.**

- a. Housing units and all facilities therein will be properly maintained and regularly inspected to insure human decency and sanitation.  
**(Reference: CCR, Title 15, Section 3345.)**

### **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in CVSP's ASU are provided a clean, properly maintained cell that approximates those of general population inmates. Telephonic and written repair requests are generated in the unit and submitted to Plant Operations when repairs are needed. In addition, regularly scheduled maintenance is provided. General repairs are completed in a timely manner. Emergency work requests and health and safety issues are completed immediately.

- b. Control of vermin and pests will be maintained by a regular inspection by the institutional vector control.  
**(Authority cited: Toussaint v. McCarthy. Reference: CCR, Title 15, Section 3345.)**

### **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that CVSP's ASU controls vermin and pests by conducting regular inspections of the unit. Weekly inspections and pesticide applications provide for the control of vermin and pests. In the event of an emergency infestation, the ASU Sergeant notifies Plant Operations and the situation is responded to immediately



2. **Restrictions.** Whenever an inmate in ASU is deprived of any usually authorized item or activity and the action and reason for that action is not otherwise documented and available for review by administrative and other concerned staff, a report of the action will be made and forwarded to the unit administrator as soon as possible.  
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(b); and DOM, Section 52080.33.1.)

### Findings

#### COMPLIANCE

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit staff utilize a written memorandum to notice administration as required.

3. **Clothing.** No inmate in ASU will be required to wear clothing that significantly differs from that worn by other inmates in the unit, except that temporary adjustments may be made in an inmate's clothing as is necessary for security reasons or to protect the inmate from self-inflicted harm. No inmate will be clothed in any manner intended to degrade the inmate.  
(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(c); and DOM, Section 52080.33.2.)

### Findings

#### COMPLIANCE

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed no instances wherein inmates housed in the ASU were required to wear clothing that significantly differed from that worn by other inmates in the unit; nor were inmates clothed in a manner intended to degrade or humiliate.

4. **Meals.** Inmates assigned to ASU, including special purpose segregated housing, will be fed the same meal and ration as is provided for inmates of the general population, except that a sandwich meal may be served for lunch. Deprivation of food will not be used as punishment.  
**(Authority cited: PC, Sections 2084 and 5058. Reference: CCR, Title 15, Section 3343(d); and DOM, Section 52080.33.3.)**

### **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, reviewed unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the ASU are receiving the same meals and rations as provided for the general population inmates. No examples of food deprivation were found in the unit.

Food trays are prepared in the main kitchen and transported to the ASU where staff serve the inmate population. Food temperatures are being taken and logged by unit staff. Meal sample reports are being utilized.

5. **Mail.** Inmates assigned to ASU, including special purpose segregated housing, will not be restricted in their sending and receiving of personal mail, except that incoming packages may be limited in number, and in content, to that property permitted in the segregated unit to which an inmate is assigned.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Sections 3138 and 3343(e); and DOM, Section 52080.33.4.)**

### **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that inmates housed in the ASU are not restricted from either sending or receiving personal mail, except those restrictions as defined in the CCR.

6. **Visits.** Inmates assigned to segregated housing, except for inmates assigned to security housing units (SHU), in accordance with Section 3341.5, shall be permitted to visit under the same conditions as are permitted inmates of the general population. Inmates assigned to SHUs shall be prohibited from physical contact with visitors.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(f); and DOM, Section 52080.33.5.)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that all ASU inmates are restricted to noncontact visits. The review team found the CVSP ASU visiting process to be in accordance with current departmental and institutional policy and procedures.

7. **Personal Cleanliness.** Inmates assigned to ASU, including special purpose segregated housing, will be provided the means to keep themselves clean and well groomed.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(g); and DOM, Section 52080.33.6.)**

- a. Showering and shaving will be permitted at least three times a week.

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that shower facilities exist in the ASU. ASU inmates are provided the opportunity to shower three times per week inside the unit. Razors for shaving are provided during shower periods.

- b. Haircuts will be provided as needed.

### **Findings**

#### **COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that haircutting equipment is provided, upon request, for use on the exercise yard.**

- c. Clothing, bed linen, and other laundry items will be issued and exchanged no less often than is provided for general population inmates.

### **Findings**

#### **COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that clothing, bed linen, and other laundry items are routinely issued upon reception in the ASU. These laundry items are exchanged on the same basis as general population.**

- 8. **Exercise.** Inmates assigned to special purpose segregation housing will be permitted a minimum of one hour per day, five days a week, of exercise outside their rooms or cells unless security and safety considerations preclude such activity. When special purpose segregated housing units are equipped with their own recreation yard, the yard periods may substitute for other out of cell exercise periods, providing the opportunity for use of the yard is available at least three days per week for a total of not less than ten hours a week.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(h).)**

## Findings

### NONCOMPLIANCE

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the CVSP ASU provides controlled compatible, reintegrated mixed, and walk-alone yard group designations. No yard group designation is receiving the required ten hours of outdoor exercise per week as required.

9. **Reading Material.** Inmates assigned to ASU, including special purpose segregated housing, will be permitted to obtain and possess the same publications, books, magazines, and newspapers as are inmates of the general population, except that the quantity may be limited for safety and security reasons. Library services will be provided and will represent a cross-section of material available to the general population.  
(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(i).)

## Findings

### COMPLIANCE

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that ASU inmates are provided library books on a weekly basis. The books are requested from the unit officer who distributes the reading material on Third Watch.

10. **Rule Changes.** The Notice of Change to the CCR shall be posted and made available to all inmates and staff. Notices shall be posted in inmate housing units, corridors, and other areas easily accessible to inmates, and provided to inmate lock-up units. The Classification and Parole Representative shall ensure

that the inmate population has knowledge of the Board of Prison Terms/Narcotic Addiction Evaluation Authority Rules and of amendments.

**(Authority cited: PC, Sections 2080 and 5058(a). Reference: DOM, Sections 12010.5.8 and 12010.8.)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that the ASU staff post proposed changes or changes to the Director's Rules, the DOM, ABs, and memorandums that affect the inmate population in areas easily accessible to the inmates. These notices are distributed to the inmate population by staff and are available upon inmate request.

11. **Telephones.** Institutions will establish procedures for the making of outside telephone calls by inmates in ASU. Such procedures will approximate those for the work/training incentive group to which the inmate is assigned, except that individual calls must be approved by the supervisor in charge or the administrator of the unit before a call is made.

**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(j).)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that CVSP provides ASU inmates telephone usage pursuant to CCR, Title 15, Section 3343 (j). This includes emergency usage only.

12. **Institution Programs and Services.** Inmates assigned to segregated housing units will be permitted to participate and have access to such programs and services as can be reasonably provided within the unit without endangering the security or the safety of persons. Such programs and services will include, but are not limited to: education, commissary, library services, social services, counseling, religious guidance, and recreation.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(k).)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that CVSP provides programs to include commissary, library services, recreation, and spiritual counseling. In addition, religious publications are provided upon request.

13. **Visitation and Inspection.** Inmates assigned to ASU, including special purpose segregated units, will be seen daily by the custodial supervisor in charge of the unit and by a physician, registered nurse, or medical technical assistant and, by request, members of the program staff. A timely response should be given to such requests wherever reasonably possible.  
**(Authority cited: PC, Section 5058. Reference: CCR, Title 15, Section 3343(l).)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that a custody supervisor is assigned to the ASU on both Second and Third Watches. In addition, management staff are available for interviews prior to ICC hearings and CDC 114-D segregation placement administrative reviews. The Program Sergeant tours the unit

during First Watch to ensure any emergency is properly addressed. The medical/psychiatric staff are assigned to the unit on Second and Third Watch passing out medication, collecting sick call slips, and screening for medical and mental health needs.

- a. The custodial officer in charge of a disciplinary detention unit, segregation unit, or SHU, where inmates are segregated for disciplinary or administrative purposes, will ensure that inmates needing medical attention receive it promptly.

**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3345.)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.

The review revealed that unit custody staff notify medical staff in the event of any medical situation or emergency. The general medical treatment line is conducted on Tuesdays. First Watch medical emergencies are responded to by the medical staff assigned to Central Health. In addition, as stated above, medical/psychiatric staff are assigned to the unit.

14. **Management Cells.** Inmates assigned to segregated housing, who persist in disruptive, destructive, and dangerous behavior and will not heed or respond to orders and warnings to desist, are subject to placement in a management cell, as provided in CCR, Title 15, Section 3332(f).

**(Authority cited: PC, Sections 2601(d), 5054, and 5058. Reference: CCR, Title 15, Section 3343(m).)**

- a. An inmate who persists in unduly disruptive, restrictive, or dangerous behavior and who will not heed or respond to orders and warnings to desist from such activity, may be placed in a management cell on an order of the unit's administrator or, in his or her absence, an order of the watch commander.



### **Findings**

#### **NOT RATABLE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that CVSP does not utilize management cells.**

- b. In addition to any necessary incident or disciplinary reports, the matter will be reported to the Warden, Superintendent, Chief Disciplinary Officer, or Administrative Officer of the Day (AOD), one of whom will review management cell resident status daily.

### **Findings**

#### **NOT RATABLE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that CVSP does not utilize management cells.**

- c. An inmate, who requires management cell placement for longer than 24 hours, will be considered for transfer to a psychiatric management unit or other housing appropriate to the inmate's disturbed state.  
**(Reference: CCR, Title 15, Section 3332(f); and DOM, Section 52080.22.4.)**

### **Findings**

#### **NOT RATABLE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed that CVSP does not utilize management cells.**

15. **Access to the Courts.** Inmates confined in ASU for any reason will not be limited in their access to the courts. If an inmate's housing restricts him or her from going to the inmate law library, arrangements will be made to deliver requested and available library material to the inmate's quarters.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3164(a) and (d); DOM, Section 53060.10; and Toussaint v. Gomez.)**

### **Findings**

### **COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff and inmates.**

**The review revealed CVSP's ASU maintains a law library within the unit. Inmates submit written requests for law library services to the unit Law Library Officer. Inmates are scheduled for access as requested. Preferred legal users and inmates with court deadlines receive priority access.**

16. **ASU Log.** A CDC 114 will be maintained in each ASU, including special purpose segregated units. One CDC 114 may serve two or more special purpose units which are administered and supervised by the same staff members.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(a); and DOM, Section 52080.22.5.)**

### **Findings**

### **COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.**

**The review revealed that a CDC 114 is maintained within the unit. All entries are appropriately recorded in accordance with departmental policy and procedures.**

17. **Isolation/Segregation Record.** A separate record will be maintained for each inmate assigned to ASU, including special purpose segregated units. This record will be compiled on the CDC 114-A, and the CDC 114-A1.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3344(b); DOM, Section 52080.22.5; and IB 98/27.)**
- a. All significant information relating to the inmate during the course of segregation, from reception to release, will be entered on the CDC 114-A in chronological order.

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 114-A is maintained for each inmate assigned to the ASU. The CDC 114-As were found to contain significant information, in chronological order, relating to the inmate during the course of segregation; however, cell inspections are not consistently conducted/documented.

- b. The CDC 114-A1 documents the inmate's current yard group designation.

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The CPRB reviewed a random sample of 15 CDC 114-A1s. Of the 15 CDC 114-A1s reviewed, 14 (93 percent) documented the inmate's current yard group designation.

- c. The CDC 114-A1 documents the inmate's special information.

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that each (100 percent) of the 15 randomly selected CDC 114-A1s reviewed documented the inmate's special information.

- d. The CDC 114-A1 will be maintained in the segregation log and be updated as new information is obtained. The Segregation Officer shall begin a new CDC 114-A1 at least every 90 days or at anytime this form becomes difficult to read.

## **Findings**

### **NONCOMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that in a random sample of 15 CDC 114-A1s reviewed, 3 were not ratable as the inmate had not been on ASU status for a period of time long enough to require a 90-day update. Of the 12 ratable CDC 114 A1s, 10 (83 percent) were updated as required. The 2 remaining records were not updated as required.

18. **Safety.** Each Warden and Superintendent must have in effect, at all times, a plan approved by the Director for meeting emergencies delineated and required by the California Emergency Services Act of 1970.  
**(Authority cited: PC, Sections 5454 and 5458. Reference: CCR, Title 15, Sections 3302(b)(4) and 3303(a)(4); and DOM, Sections 52090.1, 2, 5, 6.1, 7, and 52090.19.)**
- a. Institution heads shall maintain procedures for fire prevention and suppression. Fire protection practices and departmental policy mandate that all employees be instructed and trained concerning their duties and

responsibilities should it become necessary to conduct an emergency evacuation for any fire or life threatening condition.

**(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 2090.19.)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that CVSP's ASU maintains a written policy, which specifies the unit's fire prevention regulations and practices.

- b. Staff and inmates shall be familiar with fire evacuation routes, exits, and procedures. An evacuation drill shall be conducted quarterly on each watch. Where such drills would jeopardize personal safety or Facility security, staff shall conduct a walk-through of the procedure. Such walk-through drills shall be monitored by the area supervisor to ascertain that actual evacuation could be accomplished as required.

**(Reference: CCR, Title 15, Section 3303(a); and DOM, Section 52090.19.)**

### **Findings**

#### **PARTIAL COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that staff are trained with emergency evacuation plan procedures and evacuation routes are conspicuously posted within the unit. However, of the 12 required fire drills, 8 (67 percent) were conducted.

- c. At the conclusion of fire drills, the area supervisor shall complete a Fire Drill Report (DS 5003) indicating the necessary information and forward a copy to the Fire Chief.

**(Reference: CCR, Title 15, Section 3303(a)(4); and DOM, Section 52090.19.)**

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that the DS 5003s are being completed and forwarded to the Fire Chief as required.

## **II**

### **DUE PROCESS**

Procedural safeguards are essential for effective transfers of prisoners from the general prison population to a maximum-security unit in order to segregate such prisoners for administrative reasons or purposes.

1. **Authority.** Authority to order an inmate to be placed in ASU, before such action is considered and ordered by a classification hearing, may not be delegated below the staff level of Correctional Lieutenant, except when a lower level staff member is the highest ranking official on duty.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336; and DOM, Section 52080.25.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each of the 30 records reviewed, (100 percent) contained documentation on the CDC 114-D to confirm the level of the official ordering segregation placement was at the Correctional Lieutenant level or higher.

2. **Written Notice.** The reason for ordering an inmate's placement in ASU will be clearly documented on the CDC 114-D by the official ordering the action at the time the action is taken.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3336(a); DOM, Section 52080.25; and IB 98/27.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each of the 30 records reviewed, (100 percent) contained a clearly stated date and reason(s) for placement on the CDC 114-D.

3. **Receipt of CDC 114-D.** A copy of the CDC 114-D with the "order" portion of the form completed, will, if practical, be given to the inmate prior to placement in ASU, but not later than 48 hours after such placement.  
**(Authority: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3336(d) and 3339(b)(1); and DOM, Section 52080.25.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each of the 30 records reviewed, (100 percent) contained documentation that indicated the inmates were given a copy of the CDC 114-D within 48 hours of placement.

4. **Confidential Material.** Documentation given the inmate concerning information from a confidential source shall include an evaluation of the source's reliability, a brief statement of the reason for the conclusion reached, and a statement of the reason why the information or source is not disclosed.  
**(Authority: PC, Sections 2081.5, 2600, 2601, 5054, and 5058. Reference: CCR, Title 15, Section 3321(b)(2); and DOM, Sections 52080.27.4 and 61020.9.)**

### **Findings**

#### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 28 were not ratable as the reason for placement was not based on confidential information. Each (100 percent) of the 2 ratable records documented that the Confidential Information Disclosure, CDC 1030, was appropriate and issued within the required time frame.

5. **Review.** On the first work day following an inmate's placement in ASU, designated staff at not less than the level of Correctional Captain will review the order portion of the CDC 114-D. If retention in ASU is approved at this review, the following determinations will be made at this level:  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3337.)**

### **Findings**

#### **PARTIAL COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.



Of the 30 records reviewed, 23 (77 percent) contained documentation of a placement review by a Captain within the first working day following the inmate's placement in ASU. Of the 7 remaining records, 5 documented a late review by a Captain (1 to 4 days late) and 2 records documented the review was conducted by an acting Captain with a late counter signature by an Associate Warden (1 day late).

- a. Determine the appropriate assignment of staff assistance.  
(Reference: CCR, Title 15, Section 3337(a).)

### Findings

#### COMPLIANCE

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 28 (93 percent) contained documentation of a determination for the assignment of an SA/IE. The 2 remaining records left this section incomplete (not all boxes checked as appropriate).

- b. Determine the inmate's desire to call witnesses or submit other documentary evidence. If the inmate requests the presence of witnesses or submission of documentary evidence at the classification hearing on the reason or need for retention in segregated housing, an IE will be assigned to the case. A request to call witnesses must be submitted in writing by the inmate.  
(Reference: CCR, Title 15, Section 3337(b).)

### Findings

#### PARTIAL COMPLIANCE

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 25 (83 percent) contained documentation regarding the need for witnesses. The 5 remaining records left this section blank.

- c. Determine if the inmate has waived the 72-hour time limit in which a classification hearing cannot be held, as indicated on the CDC 114-D, or the inmate desires additional time to prepare for a classification hearing.  
**(Reference: CCR, Title 15, Section 3337(c).)**

### **Findings**

#### **PARTIAL COMPLIANCE**

**The CPRB examined 30 central files of inmates housed in CVSP's ASU.**

**Of the 30 records reviewed, 25 (83 percent) contained documentation that the inmate made a determination regarding the 72-hour time limit or had refused to sign the waiver section. The 5 remaining records documented a waiver of the 72-hour time period absent a signature by the inmate.**

- d. Determine the most appropriate date and time for a classification hearing based upon the determination arrived at under Section 3337(a), (b), and (c), and the time limitations prescribed in CCR, Title 15, Section 3338.  
**(Reference: CCR, Title 15, Section 3337 (d).)**

### **Findings**

#### **COMPLIANCE**

**The CPRB examined 30 central files of inmates housed in CVSP's ASU.**

**Of the 30 records reviewed, 28 (93 percent) contained documentation that the hearing time frames were appropriate based on the inmate's request. The 2 remaining records documented that the hearing was held within the 72-hour time frame absent a signed waiver by the inmate.**

- e. Decision to retain in ASU or release to unit/facility.

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each (100 percent) of the 30 records reviewed contained documentation that a decision was made to retain or release the inmate based on the administrative review.

6. **Classification Hearing.** An inmate's placement in temporary segregation shall be reviewed by the ICC within 10 days of receipt in the unit.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3335(c), 3338(a), (b), (c), (d), (g), (h), (i), 3375, and 3339 (b) (2); and DOM, Sections 52080.27.4 and 62010.9.1.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each (100 percent) of the 30 records reviewed, documented an ICC review within 10 days of an inmate's placement in ASU.

- a. The determinations arrived at in the classification hearing will be documented on the CDC 128-G. Such documentation will include an explanation of the reason and the information and evidence relied upon for the action taken. The inmate will also be given copies of all completed forms and of all other documents relied upon in the hearing, except those containing confidential information.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Sections 3338(i), 3375(g), and (h); and DOM, Sections 52080.27.4 and 62010.9.1.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed documented the determinations arrived at during the ICC on the CDC 128-G.

- b. Was the hearing date recorded on the CDC 128-G?  
**(Reference: CCR, Title 15, Section 3375(g)(9); and DOM, Section 62010.9.1.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed contained properly documented hearing dates on the CDC 128-G.

- c. Was the inmate's presence at the hearing documented on the CDC 128-G?  
**(Reference: CCR, Title 15, Sections 3338(c) and 3375(g)(5); and DOM, Section 52080.27.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed contained documentation to verify the inmate's presence or absence at the hearing on the CDC 128-G.

- d. Were the Hearing Officers identified on the CDC 128-G?  
(Reference: CCR, Title 15, Section 3375(g)(6-8); DOM, Section 62010.9.1.)

### Findings

#### COMPLIANCE

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed identified the hearing officers on the CDC 128-G.

- e. If appropriate, were the SA/IE identified in the CDC 128-G?  
(Reference: CCR, Title 15, Section 3338(c)(i); and DOM, Section 62010.9.1.)

### Findings

#### COMPLIANCE

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 28 were not ratable as the need for a SA/IE was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. Each (100 percent) of the 2 ratable records documented the need for a SA/IE on the CDC 128-G when this information was not otherwise properly documented on the CDC 114-D.

- f. If appropriate, was the witness portion addressed in the CDC 128-G?  
**(Reference: CCR, Title 15, Sections 3338(h) and (i); and DOM, Section 52080.27.3-.4.)**

### **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 25 were not ratable as the need for witnesses was properly documented on the CDC 114-D or the CDC 128-G had not yet been typed. Each (100 percent) of the 5 ratable records contained documentation regarding inmate witnesses on the CDC 128-G when this information was not otherwise documented on the CDC 114-D

- g. The completed CDC 128-G contains the yard group designation arrived at during the classification hearing.  
**(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 98/27.)**

### **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed contained documentation of the inmate's yard group designation on the CDC 128-G.

- h. The completed CDC 128-G documents the inmate's current cell status (single or double celled).  
**(Reference: CCR, Title 15, Section 3338(i); DOM, Section 52080.27.4; and IB 97/27.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed contained documentation of the inmate's current cell status on the CDC 128-G.

- i. The completed CDC 128-G documents the inmate's participation during committee and their agreement or disagreement with the ICC's action.  
**(Reference: CCR, Title 15, Sections 3338(i) and 3375(f)(2-6); and DOM, Section 52080.27.4.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 3 were not ratable as the inmate had attended ICC so recently, the CDC 128-G had not yet been typed. Each (100 percent) of the 27 ratable records reviewed contained documentation of the inmate's participation with the ICC on the CDC 128-G.

7. **Classification Review.** Instead of ICC reviewing each inmate's case every 30 days, inmates in ASU for non-disciplinary reasons shall require routine review no more frequently than every 90 days, or when scheduled by staff for specific action. Inmates segregated for disciplinary reasons shall be reviewed by ICC at least every 180 days, or when scheduled by staff for specific action.  
**(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, ASU Classification Review.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Of the 30 records reviewed, 11 were not ratable as the inmate had not been on ASU status long enough to require a follow-up review. Each (100 percent) of the 19 ratable records, contained documentation of an ICC review as appropriate.

8. **The CSR Review.** All inmates retained in ASU at their ten-day ASU hearing shall be referred to the CSR for retention authorization at that initial review.  
**(Authority cited: Larry Witek Memorandum of Interim Action dated November 20, 2001, ASU Classification Review.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files of inmates housed in CVSP's ASU.

Each (100 percent) of the 30 ratable records contained documentation that indicated the case had been referred to a CSR for review as appropriate.

## **IV**

### **ADMINISTRATION**

1. **Training.** All staff working in specialized units are to receive specialized training centering around that unit's operation and program.  
**(Authority cited: PC, Sections 830.5, 832, 5054, 5058, 13600, and 13601. Reference: DOM, Section 32010.14.5.)**



## **Findings**

### **COMPLIANCE**

**The CPRB interviewed In-Service Training staff and examined the training records and unit On-the-Job Training slips of all ASU staff assigned to the unit for one year or more.**

**The review revealed that 13 custody staff have been assigned to the ASU for one year or more. These 13 staff members are each required to have received 11 specialized training classes. Each (100 percent) of the 143 required classes have been completed.**

**2. The ICC.** The ICC shall consist of:

- Warden or Regional Parole Administrator, or Deputy Warden or Assistant Regional Parole Administrator (chairperson);
- Correctional Administrator or Parole Administrator III (alternate Chairperson);
- Psychiatrist or Physician;
- Facility Captain;
- Correctional Captain;
- CC III or Parole Agent III, or CC II or Parole Agent II (Committee Recorder);
- Assignment Lieutenant;
- Educational or Vocational Program Representative; and
- Other staff as required.

**(Authority cited: PC, Sections 5054 and 5058. Reference: CCR, Title 15, Section 3376(c)(2); and DOM, Section 62010.8.2.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined 30 central files, reviewed CDC 128-Gs, and observed ICC.

The review revealed that the composition of the ICC was in compliance with this standard.

3. **Record of Disciplinary.** All institutions will maintain a Register of Institution Violations. A Register of Institution Violations is a compilation of one completed copy of each rule violation report issued at a facility, maintained in chronological order.  
**(Authority cited: PC, Sections 2081, 5054, and 5058. Reference: CCR, Title 15, Sections 3326(a)(1-2); and DOM, Section 52080.15.1.)**

## **Findings**

### **COMPLIANCE**

The CPRB interviewed appropriate staff and examined the Disciplinary Log and Register of Institutional Violations.

The review revealed that the Institution maintains a Register of Institutional Violations which meets the basic requirements of DOM. A tracking system is utilized to follow each disciplinary log number and adjudicated Rules Violation Report.

4. **Post Order-Firearms.** Detailed instructions regarding the use of firearms shall be contained in the post orders of armed posts and shall be issued to staff that may regularly be required to use firearms in the course of their duties.  
**(Authority cited: PC, Sections 830, 832.5, 5054, and 5058. Reference: DOM, Section 55050.4.)**

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that there are five identified gun posts (three control booths and two yard guns) that require use of force policies be addressed as part of the post orders. Each (100 percent) armed post directed the staff to read and become familiar with CCR, Title 15, Section 3268.

5. **Post Order-Job-Site.** A copy of the post order shall be provided for every post and a copy shall be physically located at each job-site.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.)**

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that a current copy of the post order is provided at the job-site for each (100 percent) of the 20 ASU posts.

6. **Post Order-Staff.** Supervisors, by authority of the Correctional Captain or area manager, shall ensure that employees read and understand their post orders upon assuming their post.  
**(Authority cited: PC, Sections 5054 and 5058. Reference: DOM, Section 51040.6.1.)**

## **Findings**

### **PARTIAL COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.**

**The review revealed that unit supervisors do not consistently ensure that custodial staff assigned to the ASU read and understand their post order upon assuming their post.**

- a. Employees under post orders are required to sign and date the Post Order Acknowledgment Form (CDC 1860), verifying their understanding of the duties and responsibilities of the post. This shall be completed when the employee is assigned to the post, when the post order has been revised, or upon returning from an extended absence.

## **Findings**

### **PARTIAL COMPLIANCE**

**The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.**

**The review revealed that there are 33 identified staff who are assigned to 20 ASU posts. Of the 40 required signatures, 34 (85 percent) were present acknowledging the understanding of the post orders.**

- b. At a minimum of once each month, supervisors shall inspect the post orders and sign the CDC 1860. Any torn or missing pages noted shall be replaced as soon as practical.

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that the custodial supervisors assigned to the ASU inspect the CDC 1860 on a monthly basis.

- c. A CDC 1860 shall be attached to each post order and shall be utilized to verify that the assigned staff member has read and understood the post orders for their post. The CDC 1860s shall be kept for a period of one year from the date of last entry unless deemed evidentiary (then retained until no longer needed).  
**(Authority cited: PC, Sections 5054 and 5058. Reference DOM, Section 51040.6.2.)**

## **Findings**

### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that a CDC 1860 was attached to each (100 percent) of the 20 post orders as required. The CDC 1860s are retained for the time frames as required.

7. **Protective Vests.** All CDCR employees, regardless of personnel classification, entering a Security Housing Unit, Special Management Program, ASU, Temporary Detention Unit, Condemned Housing Unit, Psychiatric Services Unit, or Special Behavioral Treatment Program, shall wear a Stab Resistant Vest when the employee is:
  - In direct contact with inmates/wards/patients within the aforementioned units (unrestrained or restrained).

- Escorting inmates/wards/patients housed within the aforementioned units anywhere on institution grounds.
- On the aforementioned unit tiers.

**(Authority cited: DOM, Section 33020.16.2)**

### **Findings**

#### **COMPLIANCE**

The CPRB toured CVSP's ASU, examined unit documentation, and interviewed unit staff.

The review revealed that all required staff wear a protective vest while in the ASU.

#### **IV**

#### **USE OF FORCE**

1. **Extraction.** Before making the final decision to proceed with any extraction, custody/health care staff must consider the gravity of the situation, coupled with the inmate's demeanor, e.g., verbal aggression as opposed to physical aggression, prior history of violence, physical threat to the safety of others, security of the Institution, etc., which may reasonably occur if the inmate is not moved.

**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268 (b); and AB 99/03.)**

### **Findings**

#### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU within the last year.

Of the three incident reports reviewed, two were not ratable as they did not necessitate an extraction. The one (100 percent) ratable record contained documentation that consideration was given to the gravity of the situation, coupled with the inmate's demeanor, prior history of violence, physical threat to the safety of others, security of the institutions, etc., which may reasonably occur if the inmate(s) were not moved.

- a. Preplanned tactical extraction situations will be videotape recorded. (Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)

### Findings

#### COMPLIANCE

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU within the last year.

Of the three incident reports reviewed, two were not ratable as they did not necessitate an extraction. The one (100 percent) ratable record reviewed documented that the incident was properly videotape recorded.

- b. In calculated use of force situations where inmates are housed, a supervisor shall administer the OC product against the inmate and any extraction will be videotape recorded. Prior authorization for the use of an OC product shall be obtained during business hours at the level of Correctional/Facility Captain, or higher, and during non-business hours the AOD. (Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)

### Findings

#### COMPLIANCE

The CPRB examined the three closed incident report packages of use of force on inmates housed in CVSP's ASU within the last year.

Of the three incident reports reviewed, two were not ratable as they did not necessitate the use of OC during an extraction. The one (100 percent) ratable record documented that the prior authorization for the use of OC was properly obtained or denied.

2. **Use of OC.** In institutions, the use of OC is designed to control, subdue, contain, or escort a combative, assaultive, violent, or physically resistive inmate(s). The use of this chemical agent shall not be for punishment and must be reasonable and necessary.  
**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 99/03.)**

### **Findings**

#### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU during the past year.

Each of the three incident reports reviewed documented that the use of OC was appropriate.

3. **Decontamination.** Any exposed individual shall be decontaminated in accordance with departmental policy. Those refusing decontamination shall be monitored by health care employees at least every 15 minutes for a period of not less than 45 minutes with documentation of their observations on a Medical Report of Injury or Unusual Occurrence.  
**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: AB 96/4R and AB 99/03.)**

### **Findings**

#### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU during the past year.



Each of the three incident reports reviewed documented the decontamination of the inmate or refusal by the inmate of decontamination, as appropriate.

4. **Use of Force/Reasonable Force.** The force that an objective, trained, and competent correctional employee, faced with similar facts and circumstances, would consider necessary and reasonable to subdue an attacker, overcome resistance, effect custody, or gain compliance with a lawful order.  
**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268(a)(1); and AB 99/03.)**

### **Findings**

#### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU during the past year.

Each (100 percent) of the three incident reports reviewed documented that the force used was necessary and reasonable to subdue an attacker, overcome resistance, effect custody, or gain compliance with a lawful order.

5. **Reporting Force.** An employee who uses or observes non-deadly force greater than verbal persuasion to overcome resistance or gain compliance with an order shall document that fact. The document shall identify any witnesses to the incident and describe the circumstances giving rise to the use of force, and the nature and extent of the force used. The employee shall provide the document to his or her immediate supervisor.  
**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268.1(a)(1); and AB 99/03.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU during the past year.

Each (100 percent) of the three incident reports reviewed indicated that a report, including the identification of witnesses, was written by the employee who used or observed non-deadly force greater than verbal persuasion. These reports were then given to the employee's immediate supervisor as required.

6. **Reviewing Force.** The employee's immediate supervisor shall review the document to ensure that it is adequately prepared and to reach a judgment concerning the appropriateness of the force used. The supervisor shall document his or her conclusions and forward them along with the employee's document, through the designated chain of command, to the institutional head for approval or follow-up action.  
**(Authority cited: PC, Sections 835(a), 2650, 2651, 2652, 5054, and 5058. Reference: CCR, Title 15, Section 3268.1(a)(2); and AB 99/03.)**

## **Findings**

### **COMPLIANCE**

The CPRB examined the three closed incident report packages that documented use of force on inmates housed in CVSP's ASU during the past year.

Each (100 percent) of the three incident reports reviewed indicated the involved employee's immediate supervisor reviewed the report, ensured that it was adequately prepared, and reached a judgment concerning the appropriateness of the force used. The reports were then forwarded through the designated chain of command, to the institutional head and Executive Review Committee for analysis, approval or follow-up action.

## Review of Administrative Segregation and Due Process

### Chuckawalla Valley State Prison

#### GLOSSARY

<b>AB</b>	Administrative Bulletin
<b>AOD</b>	Administrative Officer of the Day
<b>ASU</b>	Administrative Segregation Unit
<b>CC</b>	Correctional Counselor
<b>CCR</b>	California Code of Regulations
<b>CDCR</b>	California Department of Corrections and Rehabilitation
<b>CDC 114</b>	Isolation Log Book
<b>CDC 114-A</b>	Isolation/Segregation Profile
<b>CDC 114-A1</b>	Inmate Segregation Profile
<b>CDC 114-D</b>	Order for Placement/Retention in Administrative Segregation
<b>CDC 128-G</b>	Classification Chrono Form
<b>CDC 1860</b>	Post Order Acknowledgment Form
<b>CPRB</b>	Compliance/Peer Review Branch
<b>CSR</b>	Classification Staff Representative
<b>CVSP</b>	Chuckawalla Valley State Prison
<b>DOM</b>	Department Operations Manual
<b>DS 5003</b>	Fire Drill Report
<b>IB</b>	Informational Bulletin
<b>IE</b>	Investigative Employee
<b>ICC</b>	Institution Classification Committee
<b>OC</b>	Oleoresin Capsicum
<b>PC</b>	California Penal Code
<b>SA</b>	Staff Assistant
<b>SHU</b>	Security Housing Unit

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

CHUCKAWALLA VALLEY STATE PRISON  
FEBRUARY 25 THROUGH MARCH 7, 2008

The seal of the California Department of Corrections and Rehabilitation is circular. It features a green outer ring with the text "DEPARTMENT OF CORRECTIONS AND REHABILITATION" at the top and "STATE OF CALIFORNIA" at the bottom. The center of the seal depicts a yellow book with a flame above it, set against a blue background.

**PRELIMINARY**

AUDITS BRANCH

CALIFORNIA DEPARTMENT OF CORRECTIONS AND  
REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

REPORT OF FINDINGS AND RECOMMENDATIONS

BUSINESS SERVICES

CHUCKAWALLA VALLEY STATE PRISON

FEBRUARY 19 – MARCH 7, 2008

**PRELIMINARY**

CONDUCTED BY  
THE AUDITS BRANCH



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**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CHUCKAWALLA VALLEY STATE PRISON**

**INTRODUCTION**

The California Department of Corrections and Rehabilitation's (CDCR), Office of Audits and Compliance (OAC), Audits Branch (AB) conducted an audit of Business Services at Chuckawalla Valley State Prison (CVSP). The purpose of the audit was to analyze and evaluate the level of compliance with State and departmental policies, procedures, rules, regulations, operational objectives, and guidelines. The following areas were audited:

- Personnel Transactions;
- Delegating Testing;
- Payroll/Accounting;
- Position Control;
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

The fieldwork was performed during the period of February 19 through March 7, 2008. The exit conference was held on March 7, 2008.

René Francis, Certified Government Financial Manager, supervised the audit. Management Auditors Annette Sierra, Annecia Coleman, Michael Robinson, Deborah Brannon and Naomi Banks conducted the audit. In addition, Ray York, Correctional Food Manager II, California Correctional Center at Susanville, Shirley Cowley, Hazardous Materials Specialist, California Rehabilitation Center, and Greg Henniger Correctional Plant Supervisor, Ironwood State Prison provided subject matter expertise. Patricia Weatherspoon, Senior Management Auditor provided second line supervision and review. Richard C. Krupp, Assistant Secretary of the OAC, provided executive management oversight.

The audit consisted of an entrance conference, review of the prior reports, test of transactions, interviews, observations, periodic management briefings, an exit conference, and issuance of the preliminary audit report.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CHUCKAWALLA VALLEY STATE PRISON**

**AUDIT SCOPE**

The scope of the audit encompasses the examination and evaluation of the adequacy and effectiveness of CVSP's system of management control and compliance to applicable policies, procedures, rules, and regulations. The audit period may include prior fiscal years if deemed necessary. The control objectives include, but are not limited to the following:

- State assets are safeguarded from unauthorized use or disposition;
- Transactions are executed in accordance to management's authorizations;
- Transactions are executed in accordance with applicable rules and regulations;
- Transactions are recorded correctly to permit the preparation of financial and management reports; and
- Programs are working efficiently and effectively.

In order to determine the adequacy of the control systems and level of compliance with State, federal, and departmental fiscal procedures, the audit team performed the following audit procedures:

- Examined evidence on a test basis supporting management's assertions;
- Performed detailed analyses of documentation and transactions;
- Interviewed Facility staff;
- Made inspections and observations;
- Performed group discussions of the overall impact of deficiencies; and
- Discussed deficiencies with supervisors and management throughout the audit process.



## **SYMPTOMS OF CONTROL DEFICIENCIES**

Experience has indicated that the existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system. These symptoms may apply to the organization as a whole or to individual units or activities. Department heads and managers should identify and make the necessary corrections when warned by any of the danger signals listed below:

- Policy and procedural or operational manuals are either not currently maintained or are nonexistent;
- Lines of organizational authority and responsibility are not clearly articulated or are nonexistent;
- Financial and operational reporting is not timely and is not used as an effective management tool;
- Line supervisors ignore or do not adequately monitor control compliance;
- No procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis;
- Internal control weaknesses detected are not acted upon in a timely fashion; and
- Controls and/or control evaluations bear little relationship to organizational exposure to risk of loss or resources.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

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**CORRECTIVE ACTION PLAN**

CVSP's corrective action plan (CAP) is due within 30 days of receipt of the draft report. See Attachment A for a sample of the format.

The CAP is designed to document the institution's plan to fully resolve the audit findings. It includes a brief description of the audit finding, the classification of the personnel directly responsible for resolving the finding(s), their telephone number and/or extension, a brief description of the proposed action and the anticipated date of completion.

Please e-mail your completed CAP to [René.Francis@cdcr.ca.gov](mailto:René.Francis@cdcr.ca.gov) and [Alberto.Caton@cdcr.ca.gov](mailto:Alberto.Caton@cdcr.ca.gov). Send the original to Alberto Caton, (AB), PO Box 942883, Sacramento, CA 95811-7243.

If you need additional time to prepare your CAP, please contact René Francis, Staff Management Auditor, at (916) 358-2070 or Alberto Caton, Correctional Administrator at (916) 358-1801.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CHUCKAWALLA VALLEY STATE PRISON**

**EXECUTIVE SUMMARY**

The Audits Branch (AB) conducted an audit of the Business Services Operations at CVSP from February 19 through March 7, 2008. The purpose of the audit was to determine the level of compliance with State, federal, and departmental rules, regulations, policies, and procedures.

The exit conference was held on March 7, 2008. The AB requested that CVSP provide a CAP within 30 days of receipt of the preliminary audit report.

**Areas audited:**

- Personnel Transactions;
- Delegating Testing;
- Payroll/Accounting;
- Position Control;
- Procurement (i.e., Service and Expense Orders/Direct Pay);
- Materials Management (i.e., Warehousing and Inventory Control);
- Plant Operations;
- Food Services;
- Inmate Trust Accounting;
- Environmental Health and Safety; and
- Occupational Health and Safety.

**Twenty-Three findings are identified in the preliminary report, categorized under the following topics:**

<b>Category</b>	<b>Number of Findings</b>	<b>Page Number</b>
Health and Safety	8	1
Administrative Concerns	2	5
Policies and Procedures	1	6
Internal Control	5	7
Late Detection and Additional Workload	6	10
Training	1	13
<b>Total</b>	<b>23</b>	

This executive summary provides the category, a brief description of the finding, prior finding if applicable, policy violated and the impact on the institution.

## **I. HEALTH AND SAFETY**

### **A. Environmental Health and Safety**

The Material Safety Data Sheets (MSDS) are not always updated. The AB noted this issue in the Garage, Vocational Auto, Painting, Carpentry, Mill & Cabinet, and the Central Kitchen. Department Operations Manual (DOM), Section 52030. (Prior Finding)

**Impact:** This condition may delay medical treatment in the event of an emergency.

There are two containers with hazardous waste located in the Vocational Auto Body shop that has been stored longer than one year. California Code of Regulations (CCR) Title 22. (Prior Finding)

**Impact:** This condition violates container storage regulations.

There were deficiencies related to Hazard Materials labels in the following locations: the Garage, Vocational Auto Painting, Printing, Roofing, Mill & Cabinet, Support Warehouse, Plant Operations, Central Kitchen, A Kitchen, B Kitchen, and the Administration Building Utility Room. DOM, Section 52030 and CCR, Title 22.

**Impact:** This issue makes it difficult to identify the contents.

Perpetual Chemical inventories were not updated in most of the following locations: Garage, Vocational Auto Painting, Printing, Roofing, Mill & Cabinet, Support Warehouse, Plant Operations, Central Kitchen, A Kitchen, B Kitchen, and the Administration Building Utility Room. DOM, Section 52030.

**Impact:** This issue may result in late detection of unauthorized use of chemicals.

### **B. Occupational Health and Safety**

Staff is not supplied with current hazard information related to their work assignments. The AB noted this deficiency in the Fire Department, B Facility Program Office, A Facility Central Kitchen, D Facility Plant Operations, Support Warehouse, and Central Health. CVSP, IIPP, Section IV, and CCR, Title 8.

**Impact:** This condition could result in employee injuries.

### **C. Food Services**

There were no temperature logs for the dishwashing machine located in the Central Kitchen. Additionally, Hazard Analysis Critical Control Plan (HACCP) forms utilized in A, B, and F Yard Kitchens did not always document the internal

temperature of potentially hazardous food items nor were the times that temperatures were documented. DOM, Section 54080.

**Impact:** This issue creates difficulty determining temperatures, and could result in late detection of equipment malfunctions and inadequate sanitation.

Possible contamination of food can occur due to the following deficiencies:

- There was evidence of rodent droppings under the pot and pan racks in the Central Kitchen dishwashing area. California Retail Food Code (CRFC), Article 6.
- The automatic door closer for the inmate restroom in the Central Kitchen is broken. In addition, there were no paper towels. CRFC, Article 2.
- Eggs were stored over prepared ready to eat food in reach-in refrigerators in the Central Kosher and A Yard Kitchens. CRFC, Article 1.
- Several 140 quart Hobart mixing bowls and 32 gallon blue plastic containers were observed with standing water in them. CRFC, Chapter 5.

**Impact:** These conditions could result in contamination of food.

Food maintained in the Central Kitchen and Satellite Facilities is not always dated. DOM, Chapter 2, Article 12.

**Impact:** This condition makes it difficult to determine if food is properly rotated, using the first-in, first-out (FIFO) method of inventory control.

## **II. ADMINISTRATIVE CONCERNS**

### **A. Occupational Health and Safety**

Members of the Health and Safety Committee or their designees are not regularly attending health and safety meetings. Additionally, a Labor Management Health and Safety Committee have been developed but members have not been appointed. DOM, Article 2, Section 31020 and CVSP, IIPP.

**Impact:** This condition may prevent health and safety issues from being discussed and resolved.

### **B. Personnel**

Probation Reports and Individual Development Plans are not prepared in a timely manner. As of March 2008, 150 of the 320 reports due have been outstanding for over 90 days. Personnel Transaction Manual (PTM), Section 900.1.

**Impact:** Employees may not be aware of their job performance.

## **III. POLICIES AND PROCEDURES**

#### **A. Plant Operations Procedure Manual (POPM)**

The POPM is outdated and may not be complete. For example, no mission statement, emergency procedures and contingencies plans are inadequate, the IIPP is outdated (August 2005), the confined space policy has not been reviewed, tool procedures were last updated on April 2005, and the Preventive Maintenance (PM) section is not dated or signed. DOM, Section 12010, and SAM, Section 20050.

**Impact:** This issue may result in staff unaware of current operational procedures. In addition, outdated procedures may make training difficult.

### **IV. INTERNAL CONTROL**

#### **A. Non-Drug Medical**

The non-drug medical warehouse has the following deficiencies (Prior Finding):

- Separation of duties is inadequate.
- Inventory reconciliations are not performed.
- Stock records are not maintained.
- There are no written desk procedures.
- Shelves are not marked with stock numbers.

SAM 20050 and DOM, Section 22030.

**Impact:** These issues result in the late detection of errors, irregularities, theft and/or misappropriation.

#### **B. Inmate Trust Accounting**

Bank Reconciliations are not always prepared 30 days after the close of the month (i.e., 56 to 112 days late). SAM, Section 7901.

**Impact:** This condition may result in the late detection of errors and irregularities.

Separation of Duties over the Cashiering function is inadequate. One person has the responsibility over the cashiering functions as well as approving deposits. Additionally, the check signer has access to the blank check stock. SAM, Section 8080.1.

**Impact:** These issues results in the late detection of errors, irregularities, misappropriation and theft.

Daily Manual Trust Reconciliation sheets are not reviewed signed and dated by a supervisor on a consistent basis. SAM, Section 7908.

**Impact:** This condition may result in late detection of errors and irregularities.

### **C. Support Warehouse**

Access to the Support Warehouse is not adequately controlled. There is no time out on the entrance logs and 37 percent of the entries tested were missing vehicle identification numbers. DOM, Section 22030..

**Impact:** This condition may result in difficulties locating a vehicle no longer located on institution grounds.

## **V. LATE DETECTION AND ADDITIONAL WORKLOAD**

### **A. Support Warehouse**

Storeroom Supplies Order Form (Std. 115) is not always completed. Twenty-five percent of the Std. 115's tested did not have Approving Signatures, 30 percent did not have the Storekeepers Signature, and 60 percent did not have the Signature nor Title of the Receiver of Goods. DOM, Section 22030.

**Impact:** This condition may result in late detection and/or irregularities.

Inventory adjustments are posted prior to approval by the Business Manager. Additionally, they are posted by someone who is not independent of the Support Warehouse Operations. SAM, Section 10860.

**Impact:** This condition may result in late detection and/or irregularities.

### **B. Plant Operations**

Equipment Maintenance Data Summary Sheets are not always prepared when new equipment is purchased. Departmental Plant Operations Maintenance Procedure Manual (DPOMPM), Section 2.D.5

**Impact:** Equipment may not be identified with the SAPMS tag and a preventive maintenance schedule may not be established.

Work Orders are incomplete. For example, many work orders are missing the asset number, cost of parts and materials and are not entered into the Facility Center Database timely. DPOMPM.

**Impact:** This condition makes it difficult to identify equipment and update equipment history reports.

### **C. Garage**

The Monthly Travel Logs (Std. 273) are not always turned in by staff operating state-owned vehicles on and off grounds. Currently, the garage does not receive 40 percent of the logs each month. SAM, Section 4107.

**Impact:** This issue results in difficulties reporting accurate vehicle mileage usage.

#### **D. Food Services**

Of the 35 Inmate Timecards (CDCR 1697) reviewed, 34 had deficiencies. For example, "S" time was not properly documented; transfer-in, Daily Movement Sheet (DMS) numbers and time worked were missing. CCR, Title 15, Section 3045. (Prior Finding)

**Impact:** These conditions may result in the posting errors, additional workload for staff, and possible over/underpayment.

#### **VI. TRAINING**

The Equipment Maintenance Supervisor has not received Hazardous Materials Training. CCR, Title 22 and DOM, 52030.

**Impact:** This issue may result in staff not adequately trained for a specific job assignment.



## **FINDINGS AND RECOMMENDATIONS**

### **I. HEALTH AND SAFETY**

#### **A. Environmental Health and Safety**

##### **1. MSDS (Prior Finding)**

The Material Safety Data Sheets (MSDS) are not always updated. The AB noted this issue in the Garage, Vocational Auto, Painting, Carpentry, Mill & Cabinet, and the Central Kitchen.

This condition may delay medical treatment in the event of an emergency.

DOM, Section 52030.4.1, requires in part that supervisors maintain a completed MSDS for each substance used in the work area.

##### **Recommendation**

Perform a review of MSDS's throughout the institution and update as necessary.

##### **2. Hazardous Waste (Prior Finding)**

There are two containers with hazardous waste located in the Vocational Auto Body shop that has been stored longer than one year.

This condition violates container storage regulations.

CCR, Title 22, states in part, "You can keep a point of generation satellite accumulation container on-site for a maximum of one year from the date you first place waste in the container..."

##### **Recommendation**

Properly dispose of the two containers of Hazardous Waste and monitor other containers to ensure Hazardous Waste is not stored longer than one year.

##### **3. Labeling**

Hazard Materials labels are missing or improperly completed in the Garage, Vocational Auto Painting, Printing, Roofing, Mill & Cabinet, Support Warehouse, Plant Operations (Stationary Engineers Shop, Paint Shop, Carpentry, Plumbing, Water Treatment, and Waste Water), Central Kitchen, A Kitchen, B Kitchen, and the Administration Building Utility Room.

This issue makes it difficult to identify the contents.

DOM, Section 52030.4.3, states in part “All containers shall be clearly appropriately labeled with name of the substance(s) or mixture contained in it.”

**Recommendation**

Train staff on the requirements of labels and complete new labels for all products and Hazardous Materials.

**4. Perpetual Inventory**

Perpetual chemical inventories were not updated in most of the following locations: Garage, Vocational Auto Painting, Printing, Roofing, Mill & Cabinet, Support Warehouse, Plant Operations, Central Kitchen, A Kitchen, B Kitchen, and the Administration Building Utility Room.

This issue may result in late detection of unauthorized use of chemicals.

DOM, Section 52030.4.6, states in part, “Perpetual (daily) inventories shall be maintained on all hazardous, toxic, volatile, flammable and caustic substances.”

**Recommendation**

Perform a Perpetual Inventory on a daily basis.

**B. Occupational Health and Safety**

**1. Codes of Safe Practices and Hazard Evaluations**

Communicating work place hazards is not performed in accordance to the CVSP-IIPP. Staff is not supplied with access to current hazard information pertinent to their work assignments. For example,

- The Fire Departments Hazard Evaluations are outdated and incomplete.
- Codes of Safe Practices and Hazard Evaluations are not maintained at B Facility Program Office, A Facility Central Kitchen, D Facility Plant Operations, Support Warehouse, and Central Health.

CVSP, IIPP, Section IV, “Communicating Workplace Hazards”, dated January 2006, states in part, “supervisors are responsible for ensuring that staff are supplied access to hazard information pertinent to their work assignments. Information concerning the health and safety hazards of task performed by department staff is available and is available from a number of sources. These sources include, but are not limited to, MSDS, equipment-operating manuals, container labels and work area postings.” Also, reference: CCR, Title 8, Sections 1669-1672.

**Recommendation**

Ensure that employees have access to Codes of Safe Practices. Additionally, maintain Hazard Evaluations.

## **C. Food Services**

### **1. Dishwasher Temperature Logs**

There were no temperature logs for the dishwashing machine located in the Central Kitchen. Additionally, HACCP forms utilized in A, B, and F Yard Kitchens did not always document the internal temperature of potentially hazardous food items nor were the times that were temperatures documented.

This issue creates difficulty determining temperatures, and could result in late detection of equipment malfunctions and inadequate sanitation.

DOM, Section 54080.20, states in part, "The temperature of refrigeration units and dishwashing machines shall be recorded daily on the log maintained by the CFM for a minimum of two years... A Hazard Analysis Critical Control Point (HACCP) program shall be developed and followed at each institution/camp to ensure food safety."

### **Recommendation**

Complete all dishwashing machine logs daily. Additionally, complete all HACCP forms to include product internal temperatures and times temperatures were taken for all potentially hazardous food items.

### **2. Food Contamination**

Possible contamination of food can occur due to the following deficiencies:

- There was evidence of rodent droppings under the pot and pan racks in the Central Kitchen dishwashing area.
- The automatic door closer for the inmate restroom in the Central Kitchen is broken. In addition, there were no paper towels.
- Eggs were stored over prepared ready to eat food in reach-in refrigerators located in the Central Kosher and A Yard Kitchens.
- Several 140 quart Hobart mixing bowls and 32 gallon blue plastic containers were observed with standing water in them.

This could result in contamination of food products.

CRFC, Vermin and Animals, Section 114259.1, states, "The premises of each food facility shall be kept free of vermin." CRFC, Toilet Facilities, Section 114276 (c) (1), states in part, "...Toilet room doors shall be separated by well-fitted, self-closing doors that prevent the passage of flies, dust, or odors...." CRFC, Hand washing, Section 113953.2 (b), states in part, "A hand washing facility shall be provided with the following in dispensers at or adjacent to, each hand washing

facility:... (b) Sanitary single-use towels or a heated-air hand drying device.” CRFC, Protection from Contamination, Section 113986 (a) (1), states in part, “Separating raw food of animal origin during transportation, storage, preparation, holding, and display from raw ready-to-eat food, including other raw food of animal origin...and cooked ready-to-eat food....” CRFC, Cleaning and Sanitizing of Equipment, Section 114105, states, “After cleaning and sanitizing, equipment and utensils shall be air dried or used after adequate draining before contact with food and shall not be cloth dried, except that utensils that have been air dried may be polished with cloths that are maintained clean and dry.”

### **Recommendation**

Expand the pest control program, repair or replace automatic door closers, provide paper towels, store eggs on a shell under ready to eat food items, and invert all mixing bowls and containers and allow adequate time for proper drying.

### **3. Food Storage**

Food maintained in the Central Kitchen and Satellite Facilities is not always dated.

This condition makes it difficult to determine if food is properly rotated using the FIFO method of inventory control.

DOM, Chapter 2, Article 12, Section 22030.11.6, Storing Material, states in part, “...All materials in inventory shall be dated at the time of receipt. Items that carry an assigned shelf life require shelf rotation; first-in, first-out warehousing shall be used with these items....”

### **Recommendation**

Date all food items when received.

## **II. ADMINISTRATIVE CONCERNS**

### **A. Occupational Health and Safety**

Members of the Health and Safety Committee or their designees are not regularly attending health and safety meetings. Additionally a Labor Management Health and Safety Committee have been developed but members have not been appointed.

This condition may prevent health and safety issues from being discussed and resolved.

The CVSP, IIPP, CVSP INSTITUTION SAFETY COMMITTEE (ISC) states in part, "The ISC meets monthly and includes the CVSP safety officer...Appointments to the ISC for CDCR staff may rotate periodically; however attendance by the appointed member or alternate is required at the monthly meeting. The Associate Warden or Manager of the listed areas shall send an appointment memorandum at the time of initial appointment and when replacements are made. The safety officer shall notify the warden if no appointment is made to a vacant position within 60 calendar days of becoming vacant."

### **Recommendation**

Develop a Labor and Management Health and Safety Committee. Additionally, ensure that the Safety Committee meets on a monthly basis.

### **B. Personnel**

Probation Reports and Individual Development Plans are not processed by supervisors for employees under their supervision. The personnel office is distributing a listing titled "Warden Annual/Probation Reports Past Due" to each department head which notes 320 reports are over due. There are 150 of the 320 reports over 90 days old.

This issue results in employees unable to ascertain the progress of their job development.

PTM, Section Agency Responsibility, 900.1, states in part, "... each State agency is responsible for the administration of the performance appraisal program for permanent and probation employee. The success of programs will depend largely on the effectiveness of training provided in the agency for employees, supervisors, and management at all levels. Each agency shall adopt a system of performance appraisals in accordance with the rules of the State Personnel Board."

### **Recommendation**

Establish a procedure and a system which ensures that performance reports and IDP's are completed and monitored.

## **III. POLICIES AND PROCEDURES**

### **A. Plant Operations Procedure Manual (POPM)**

The POPM is outdated and may not be complete. For example, there are no mission statement and emergency procedures. Contingencies plans are inadequate, the IIPP is dated August 2005, confined space is not reviewed, tool procedures were last updated on April 2005 and the PM section is not dated or signed.

This issue may result in staff unaware of current operational procedures. In addition, outdated procedures may make training difficult.

DOM, Article 6, Section 12010, states in part, "Regulations, manuals, and bulletins are utilized to transmit departmental directives and establishes procedures for their promulgation, distribution and maintenance." SAM, Section, 20050, states in part, "Experience has indicated that the existence of the following danger signal will usually indicate a poorly maintained and vulnerable control system . . . Policy and procedural or operational manuals are either not currently maintained or are non-existent".

### **Recommendation**

Review the current POPM, update as necessary to ensure that the POPM promulgates current policies and procedures.

## **IV. INTERNAL CONTROL**

### **A. Non-Drug Medical (Prior Finding)**

The non-drug medical warehouse has the following deficiencies:

- Separation of duties is inadequate;
- Inventory reconciliations are not performed;
- Stock records are not maintained;
- There are no written desk procedures; and
- Shelves are not marked with stock numbers.

These issues result in the late detection of errors, irregularities, theft and/or misappropriation.

SAM, Section 20050, Internal Controls, states, "...the elements of a satisfactory system of internal accounting and administrative controls, shall include, but are not limited to: 1) A plan of organization that provides segregation of duties appropriate for proper safeguarding of state assets...4) An established system of practices to be followed in performance of duties and functions in each of the state agencies."

DOM, Section 22030.10.1, Stock Records, states, "Stock records shall be maintained by using a manual card or computerized inventory control system."

DOM, Section 22030.11.8, Physical Inventory of Materials, states, "A count of every inventory item held in storage shall be taken annually on all materials in all warehouses, storerooms, and maintenance shop storage areas. More frequent inventories are acceptable if experience indicates that reducing the interval between physical inventories shall result in less time being consumed in the reconciliation of records."

### **Recommendation**

Assign duties to ensure that no one person has significant control over central supply duties. Establish written desk procedures for the performance of central supply duties. Maintain perpetual inventory records for all items that exceed a working stock (30 day) supply. Label all shelves with stock numbers. Perform inventory counts and spot checks of physical inventory at least monthly.

### **B. Inmate Trust Accounting**

#### **1. Bank Reconciliations**

Bank Reconciliations are not always prepared 30 days after the close of the month. During the testing period, (i.e., six months) Bank Reconciliations were prepared 56 - 112 days after the close of the month.

This condition may result in the late detection of errors and irregularities.

SAM, Section 7901, states, "All reconciliations will be prepared monthly within 30 days of the preceding month."

### **Recommendation**

Prepare Bank Reconciliations within 30 days after the close of the month.

## **2. Separation of Duties**

Separation of Duties over the cashiering function is inadequate. For example, one person has the responsibility over the cashiering function as well as approving deposits. Additionally, the check signer has access to the blank check stock.

These issues results in the late detection of errors, irregularities, misappropriation and theft.

SAM, Section 8080.1, states in part, "The...requires that the head of each state agency establish and maintain an adequate system of internal control within their agencies. A key element in a system of internal control is separation of duties. This section provides the appropriate level of separation of duties for agencies with automated accounting processes. Employees of units other than the accounting/data processing units should be used, when necessary, to provide separation of duties. No one person will perform more than one of the following types of duties: 7. Receiving and depositing remittances...9. Controlling blank check stock...."

### **Recommendation**

Separate duties so that no one person has significant control. Remove Cashier from the depositing activity except for preparation of deposits; in addition, add a process in which the supervisor reconciles CVSP deposit slips to the bank deposit confirmation. Remove custody of the spare key to the blank check stock from the check signer.

## **3. Daily Manual Trust Reconciliation Sheet**

Daily Manual Trust Reconciliation sheets are not being reviewed, signed and dated by a supervisor on a consistent basis. The AB noted this deficiency on 42 of the reconciliation sheets tested.

This condition may result in late detection of errors and irregularities.

SAM, Section 7908, states, "All reconciliations will show the preparer's name, reviewer's name, date prepared, and date reviewed."



### **Recommendation**

Review, sign and date the Daily Trust Reconciliation on a daily basis.

### **C. Support Warehouse**

Access to the Support Warehouse is not adequately controlled. There is no time out recorded on the entrance logs. Thirty-seven percent of the entries tested were missing vehicle identification numbers.

This condition may result in difficulties locating a vehicle no longer located on institution grounds.

DOM, Section 22030.11.1, states in part, "...At all facilities used to store and distribute materials, entry/exit controls shall be in place to restrict unauthorized personnel from having access to the inventory...."

### **Recommendation**

Ensure the visitor's log is filled out completely.

## **V. LATE DETECTION AND ADDITIONAL WORKLOAD**

### **A. Support Warehouse**

#### **1. Storeroom Supplies Order Form (Std. 115)**

Storeroom Supplies Order Form (Std. 115) is not always completed. Twenty-five percent of the Std. 115's tested did not have Approving Signatures, 30 percent did not have the Storekeepers Signature, and 60 percent did not have the Signature nor Title of the Receiver of Goods.

This condition may result in late detection and/or irregularities.

DOM, Section 22030.11.7, states in part, "... the requisition shall be signed by the approving officer who shall retain the triplicate copy...When the goods are received, the person who ordered them shall check the quantity received, sign the receipt portion of the triplicate copy, and send it to the warehouse for comparison of quantity filled vs. quantity received..."

#### **Recommendation**

Complete all areas of the Std. 115.

#### **2. Inventory Control**

Inventory adjustments are posted prior to approval by the Business Manager. Additionally, they are posted by someone who is not independent of Support Warehouse Operations.

SAM, Section 10860, states in part, "the business manager...will authorize the adjustment...the accounting office will post the adjustment authorized by the business manager."

#### **Recommendation**

Ensure adjustments are approved prior to posting. Have someone independent of the support warehouse post the adjustments.

### **B. Plant Operations**

#### **1. Equipment Maintenance Data Summary**

Equipment Maintenance Data Summary Sheets are not always prepared when new equipment is purchased.

As a result, equipment may not be identified with the SAPMS tag and a preventive maintenance schedule may not be established for the equipment.

DPOMPM, Section 2.D.5 and SAPMS guidelines, states in part, "All equipment will be clearly identified by placing the unique standard equipment code on each piece of equipment...Transfer equipment data from the Equipment Maintenance Summary Data Sheets following the guidelines in the Departmental Standard Plant Operations Maintenance Procedure Manual and develop assignment schedules for the completion of the PM..."

### **Recommendation**

Identify all equipment/assets in accordance to DPOMPM and the SAPMS guidelines.

## **2. Work Orders**

Work Orders are incomplete. For example, many work orders are missing the asset number, cost of parts and materials.

This condition makes it difficult to identify equipment and update equipment history reports.

DPOMPM, requires in part, the tradesperson completing the work is responsible to complete the labor and material portion of the work order, sign date, and the completion date space.

### **Recommendation**

Ensure that work orders are properly completed.

## **C. Garage**

The Std. 273 is not turned in by staff operating state-owned vehicles on and off grounds. Currently, the garage receives approximately 60 percent of the logs each month.

This issue results in difficulties reporting accurate vehicle mileage usage.

SAM, Section 4107, Travel Logs, states in part, "Agencies/departments will maintain Monthly Travel Log Form, Std. 273, on all State-owned passenger mobile equipment...."

### **Recommendation**

Establish a procedure to inform employees on the requirements of the SAM.

## **D. Food Services**

### **1. Inmate Timecards**

Thirty-five CDCR 1697's were reviewed in the Central Kitchen. The AB noted one or more of the following deficiencies present on thirty-four CDCR 1697's:

- Postings on the CDCR 1697 are not always completed as events occur. (Noted on 26 CDCR 1697's).
- Transfer-in dates are not always indicated. (Noted on nine CDCR 1697's).
- DMS numbers are not always indicated. (Noted on 12 CDCR 1697's).
- Reasons for "S" time are not always provided. (Noted on three CDCR 1697's).
- The supervisor's verification (signature & date) that inmate information is correct is not always indicated. (Noted on seven CDCR 1697's).
- A timekeeper's signature does not always follow daily entries. (Noted on three CDCR 1697's).
- Some entries are made before events occur. (Noted on one CDCR 1697)
- Weekly audits are not documented.

These conditions may result in posting errors, additional workload for staff, and possible over/underpayment.

CCR, Title 15, Section 3045, requires, the attendance of each inmate assigned to a credit qualifying assignment shall be recorded daily on an approved timekeeping log...Staff shall record the work or training time and absences of each inmate assigned to their supervision each day as they occur. CVSP Work Incentive Manual, page 13- The date the inmate transferred into the assignment and the DMS number must be included at the bottom of the sheet.

### **Recommendation**

Provide additional training to staff on IWTIP guidelines. Complete each CDCR 1697, posting as events occur. Conduct weekly audits of CDCR 1697's.

## **VI. TRAINING**

The Equipment Maintenance Supervisor has not received Hazardous Materials Training.

This issue may result in staff not adequately trained for a specific job assignment.

DOM, Section 52030.1, states, "All units of the Department shall meet or exceed the requirements of all rules, regulations and laws applicable to identification, training, use, storage, handling and disposal of hazardous, toxic, volatile, caustic and flammable substances; including those established in the Guidelines for the Control and use of Flammable, Toxic and Caustic Substances, and the Hazardous Substances Information and Training Act, LC, Division 5, Chapter 2.5."

### **Recommendation**

Ensure that the Equipment Maintenance Supervisor receives immediate training by a qualified Hazardous Material Handling Training Instructor.

**OFFICE OF AUDITS AND COMPLIANCE  
AUDITS BRANCH**

**CHUCKAWALLA VALLEY STATE PRISON**

**GLOSSARY**

<b>AB</b>	Audits Branch
<b>CAP</b>	Corrective Action Plan
<b>CCR</b>	California Code of Regulations
<b>CDCR 1697</b>	Inmate Timecard
<b>CDC 998-A</b>	Employee Attendance Records and PALS Worksheet
<b>CDCR</b>	California Department of Corrections and Rehabilitation
<b>CVSP</b>	Chuckawalla Valley State Prison
<b>DIR</b>	Daily Inventory Record
<b>CRFC</b>	California Retail Food Code
<b>DMS</b>	Daily Movement Sheet
<b>DOM</b>	Department Operations Manual
<b>DPOMPM</b>	Departmental Plant Operations Maintenance Procedures Manual
<b>FIFO</b>	First-In, First-Out
<b>FIM</b>	Financial Information Memorandum
<b>FLSA</b>	Fair Labor Standards Act
<b>GC</b>	Government Code
<b>HACCP</b>	Hazard Analysis Critical Control Plan
<b>IB</b>	Informational Bulletin
<b>IDL</b>	Inmate Day Laborer
<b>IIPP</b>	Injury and Illness Prevention Plan
<b>ISC</b>	Institution Safety Committee
<b>ITAOOG</b>	Inmate Trust Accounting Office Operational Guide
<b>ITAS</b>	Inmate Trust Accounting System
<b>ITFM</b>	Inmate Trust Fund Manual
<b>IW/TIP</b>	Inmate Work/
<b>ML</b>	Military Leave
<b>MLD</b>	Military Leave Drill
<b>MSDS</b>	Material Safety Data Sheets
<b>OAC</b>	Office of Audits and Compliance
<b>OP</b>	Operational Procedure
<b>OPF</b>	Official Personnel File
<b>PM</b>	Preventative Maintenance
<b>PPAS</b>	Personnel Post Assignment System
<b>PPC</b>	Periodic Position Control
<b>PPM</b>	Payroll Procedures Manual
<b>POPM</b>	Plant Operations Procedures Manual
<b>PTM</b>	Personnel Transactions Manual
<b>PWS</b>	Prevailing Wage Sheets
<b>SAM</b>	State Administrative Manual
<b>SAPMS</b>	Standard Automated Preventative Maintenance System
<b>SLAMM</b>	State Logistics and Materials Management
<b>Std. Form 115</b>	Order for Storeroom Supplies

SAMPLE FORMAT CORRECTIVE ACTION PLAN				
Item #	Audit Finding	Responsible Personnel	Proposed Action	Date to be Completed
A.1	<b>WRITTEN NOTICE</b>  Of the 30 records reviewed, 24 (80 percent) contained a clearly stated date and reasons for placement in part I, Notice of Reasons for Placement date. The remaining three records failed to clearly document the reason for placement in sufficient detail to enable the inmate to prepare a response or defense.	Facility Captain Do Not use individuals names and do Not use Acronyms.)	A. Facility Captains will ensure that each inmate placed in Administrative Segregation will have the placement date included on all CDC 114-Ds processed.  B. Training will be provided by the Facility Captains to ensure sufficient information is documented in abundant detail in order for an inmate to articulate a response or defense	2/2/2006

California Department of Corrections and Rehabilitation  
Office of Audits and Compliance  
Information Security Branch



Information Security Compliance Review  
Chuckawala Valley State Prison  
October 9-10, 2008

**INFORMATION SECURITY OFFICER**  
Allen J. Pugnier

**AUDITORS**  
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## Information Security Compliance Review

### Chuckawala Valley State Prison

The Office of Audits and Compliance, Information Security Branch (ISB), conducted an Information Security Compliance Review of Chuckawala Valley State Prison between the dates of March 3 through March 7, 2008. The review covered 18 different areas. Chuckawala Valley State Prison was fully compliant in 2 areas, partially compliant in 1 area, and noncompliant in 15 areas. The overall score for the Institution was 37 percent. The chart below summarizes these outcomes. Other observations, discovered during the compliance review, are also noted.

#### FINDINGS SUMMARY:

		Score	Compliant	Partial Compliance	Noncompliant
<b>STAFF COMPUTING ENVIRONMENT</b>					
1.	Use Agreement (Form 1857) is on file.	92%	C		
2.	Annual Self-Certification of Information Security Awareness and Confidentiality forms are on file.	0%			NC
3.	Information security training is current.	8%			NC
4.	Staff can log on using own password.	100%	C		
5.	Network access authorization is on file.	77%		PC	
6.	Physical locations of CPUs agree to inventory records.	58%			NC
7.	Staff CPUs labeled "No Inmate Access."	46%			NC
8.	Staff monitors are not visible to inmates.	58%			NC
9.	Anti virus updates are current.	19%			NC
10.	Security patches are current.	19%			NC

<b>INMATE COMPUTING ENVIRONMENT (Education, Library, Clerks)</b>					
11.	Physical location of CPUs agree to inventory records.	27%			NC
12.	CPU labeled as inmate computer.	27%			NC
13.	Anti virus updates are current.	0%			NC
14.	Inmate monitors are visible to supervisor.	27%			NC
15.	Portable media is controlled.	27%			NC
16.	Telecommunications access is restricted.	27%			NC
17.	Operating system access is restricted.	27%			NC
18.	Printer access is restricted.	27%			NC

Total of Tests	2	1	15
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**Overall Percentage 37%<sup>[1]</sup>**

<sup>[1]</sup> Scores for computer related tests reflect the results of testing on the locatable sample computers. The institution was able to verify 21 computers that had been surveyed out, but not recorded on the Information Technology (IT) inventory. There are 16 computers still missing.

## **Information security compliance Review**

### **Chuckawala Valley State Prison**

#### **OBJECTIVES, SCOPE AND METHODOLOGY**

The objectives of the Information Security Compliance Review were to:

- Assess compliance to selected information security requirements,
- Evaluate other conditions discovered during the course of fieldwork that may jeopardize the security of information assets of the facility or of the Department, and
- Provide information security training for management and staff.

The ISB did not review any Prison Industry Authority computers.

In conducting the fieldwork the ISB performed the following procedures:

- Interviewed senior management, information technology staff, institutional staff, and computer users.
- Asked staff to provide evidence that all authorized computer users had Acceptable Use Agreement forms and appropriate training support documentation on file.
- Tested selected information security attributes of users and information technology (IT) equipment using three different population samples. This included both the staff and inmate computing environments.
- Reviewed various laws, policies and procedures, and other criteria related to information security in the custody environment.
- Conducted physical inspection of selected computers.
- Observed the activities of the information technology support staff.
- Analyzed the information gathered through the above processes and formulated conclusions.

#### **FINDINGS AND RECOMMENDATIONS**

The ISB provided a copy of our review guide to your IT staff. It contains criteria and detailed methodology. That information, therefore, is not duplicated under each finding.

ISB's findings and recommendations are listed below. ISB staff discussed them with management in an exit conference following our fieldwork. Please contact us if you would like to discuss further any of these issues.

## Information Security Compliance Review

### Chuckawala Valley State Prison

**1. Self-certification of annual information security awareness and confidentiality is not on file for any computer user. (0 percent compliance)**

Recommendation Number 1: Require all computer users to self-certify their information security awareness and confidentiality agreement on an annual basis using form California Department of Corrections and Rehabilitation (CDCR) ISO-3025 or equivalent. (DOM, Section 49020.10.1)

**2. Information security training is not current for all computer users including both staff and contractors. (eight percent compliance)**

Recommendation: Review information security training procedures and training records maintenance. Require that all computer users receive annual information security training. Require appropriate documentation of the training. (DOM, Sections 49020.14.1 and 41030.1)

Best Practices: The information security awareness training material is located on the CDCR intranet on the Information Security Office's web page.

**3. Former employees have network access authorization. (77 percent compliance)**

Recommendation: Access to any CDCR computerized information is restricted to authorized persons. The sensitive nature of CDCR data requires strict controls over who is allowed access to it. (DOM, Section 49020.10)

Best Practice: Create a formal reporting procedure, so all staff employment and job duty changes are reported to the IT Coordinator.

**4. Physical locations of staff computers do not agree to inventory records. (56 percent compliance)**

Recommendation 1: Maintain accurate inventory records. (DOM, Sections 46030.1 and 49010.4) Evaluate procedures and resources used to maintain inventory records.

Recommendation 2: The remaining 16 un-locatable computers must be found within the 30-day period allowed for developing the corrective action plan. The institution must certify in writing that the un-locatable computers were found or

properly surveyed out. The list of un-locatable computers is shown below, sorted by computer model.

Computer Model	Property Tag Number(s)
Apple Mac/Pwr PC Desktop	7367
BASIC TIME Desktop	2585
COMPAQ D530	SI2624, SI2794, SI2622, SI2563
COMPAQ EVO Convert	SI2188, SI2171,
COMPAQ EVO510	SI2497
DELL 5133 Desktop	SI0570, SI0572
DELL GM5100 Desktop	SI0041
Dell Opti XMT Mid-Twr	7938
Generic Desktop	SI1557
HP DC5000M Desktop	
MILLENNIA Tower	SI2227
PC DESIGN Desktop	3022

Best Practices: A software solution, such as “i-Inventory,” should be considered to meet the needs of IT staff. Local IT staff should maintain a dynamic inventory; updating the inventory each time they touch a machine.

**5. Staff monitors and computers are not correctly labeled, “No Inmate Access.” (46 percent compliance)**

Recommendation: Each computer in a facility shall be labeled to indicate whether or not inmate access is authorized.  
(Title 15, Section 3041.3(d) and DOM, Sections 49020.18.3 and 42020.6)

Best Practice: Affix appropriate labels to both the monitor and CPU.

**6. Staff monitors are visible to inmates. (72 percent compliance)**

Recommendation: Reposition staff monitors or use privacy screens to shield monitors from inmate view. (DOM, Sections 47040.3 and 49010.1)

Best Practice: In areas where inmates are allowed, consider installing privacy screens to minimize inmate’s visual access.

**7. All Staff computers do not have up-to-date antivirus software. (19 percent overall compliance).**

Recommendation: Update antivirus software on all staff computers. (DOM, Section 48010.9)

**8. All Staff computers do not have up-to-date security patches. (19 percent overall compliance).**

Recommendation: Update security patches on all staff computers. (DOM, Section 48010.9)

**9. Physical locations of inmate education computers do not agree to inventory records. (27 percent compliance)**

Recommendation: Maintain accurate inventory records of all inmate computers. (DOM, Sections 46030.1 and 49010.4) Evaluate procedures and resources used to maintain inventory records on inmate computers.

**10. Inmate computers are not labeled for inmate use only. (27 percent compliance)**

Recommendation: Affix proper labels to all inmate monitors. (DOM, Sections 49020.18.3 and 42020.6)

**11. All Inmate accessed computers did not have up-to-date antivirus software. (0 percent compliance)**

Recommendation: Update antivirus software on all inmate computers. (DOM, Section 48010.9)

**12. All Inmate computer monitors were not visible to the supervisor (27 percent compliance)**

Recommendation: The approved uses of workstations by inmates shall be carried out only under very tightly controlled circumstances. Inmates using computers must be under "direct and constant supervision." (DOM, Section 49020.18.3)

Best Practice: Position all inmate monitors so that the supervisor can see the screen.

**13. All portable media must be controlled. (27 percent compliance)**

Recommendation: Portable media must be tightly controlled and should not be allowed outside of controlled inmate work areas. (DOM, Section 49020.18.3)

**14. All inmate access to telecommunication devices must be restricted. (27 percent compliance)**

Recommendation: Restrict inmate access to outside telephone lines, fax machines, and network connections. (DOM, Section 49020.18.3)

**15. Inmate access to the operating system must be restricted.  
(27 percent compliance)**

Recommendation: Access to the operating system must be tightly controlled. Inmates should never have access to the operating system. (DOM, Section 49020.18.3)

**16. All inmate accessible printers must have restricted access.  
(27 percent compliance)**

Recommendation: Reports and other printed output from inmate-utilized computers shall be reviewed closely by staff, and appropriate distribution of such output shall be monitored. (DOM, Section 49020.18.3)

## **Information Security Compliance Review**

### **Chuckawala Valley State Prison**

#### **OTHER OBSERVATIONS**

##### **Observation 1: Critical data in some areas is not being backed up.**

Recommendation: Each department manager should identify all data that is critical to their operations, including locally developed databases, and develop back-up and restoration procedures. A back up schedule should be established and enforced. (DOM, Section 48010.9.3)

##### **Observation 2: Instances of video monitoring being used instead of direct and constant supervision of inmates.**

Staff was observed monitoring inmate computer screen activities from a remote location by using a video monitor, displaying the same information as the inmates' computer. The staff monitor was placed at a height of approximately eight feet, making it difficult for constant monitoring by staff. Additionally, this does not replace the requirement of direct and constant supervision of inmates.

Recommendation: Ensure that all inmates are under direct and constant supervision. (DOM, Section 49020.17)

##### **Observation 3: Several instances of unattended staff user sessions were observed.**

Recommendation: All staff should be reminded of security policy requiring unattended machines to be secured with a password. (DOM, Section 49020.10.5)

Best Practice: Staff should lock computer by using CTL+ALT+DEL and selecting "Lock Computer," or by pressing the Windows Key and L simultaneously.

##### **Observation 4: The Information Security Coordinator (ISC) was not aware of his appointment to that position.**

Recommendation: Notify the ISC, in writing of the assignment, and maintain a historical record of all ISC appointees. (DOM, Section 49020.6)

**Observation 5: Only 25 percent of the Workgroup Computing Justification (CDC Form 1855), for unfiltered access could be located.**

Recommendation: The Workgroup Computing Coordinator is responsible for maintaining CDC Form 1855. (DOM, Section 48010.8.2)

Best Practice: The Workgroup Computing Coordinator should set up a binder to store all completed CDC Form 1855s. An alphabetical index is recommended.



CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

EDUCATION  
COMPLIANCE

CALIFORNIA STATE PRISON, LANCASTER

MARCH 10 THROUGH 21, 2008

**PRELIMINARY**



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

## EXECUTIVE SUMMARY

### OFFICE OF AUDITS AND COMPLIANCE

### EDUCATION COMPLIANCE BRANCH REVIEW

*Chuckawalla Valley State Prison*

*March 3 to 7, 2008*

#### TEAM MEMBERS:

*Raul Romero, Associate Superintendent, OAC  
G. Lynn Hada, Principal, OAC  
Beverly Penland, Vocational Vice-Principal, OAC  
John Jackson, Academic Vice-Principal, OAC  
Jan Stuter, Principal Librarian, OCE  
Mark Lechich, Academic Vice-Principal, OCE-WIA  
Tom Posey, Academic Vice-Principal, OCE-IYO  
Ron Callison, Vocational Vice-Principal, OCE-VTEA*

#### 284 Areas Reviewed

CATEGORIES	PERCENTAGE
Education Administration	46 ÷ 63 = 73%
Academic Education	45 ÷ 59 = 76%
Vocational Education	32 ÷ 41 = 78%
Library/Law Library	19 ÷ 29 = 66%
Federal Programs	91 ÷ 92 = 99%
Special Programs*	N/A %
<b>Total:</b>	<b>233 ÷ 284 = 82%</b>

***Your Corrective Action Plan (CAP) must address each of the deficiencies listed below. The CAP must be submitted to the Superintendent of the Office of Correctional Education for review and/or modification. The CAP then is due to the Office of Audits and Compliance (OAC) for review within 30 days after your receipt of the preliminary report from OAC.***

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**ADMINISTRATION SECTION**

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**I. EDUCATION ADMINISTRATION:                      73% COMPLIANCE**

***Deficiency:***

**#6   *Are law library purchases funded by the institution's general budget?* There is an ongoing attempt by CDCR Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.**

**#14   *Does the institution have an Operational Procedure for the Education Program? Does it use Department Operation Manual Chapter 10 as an inclusion?* The Operational Procedure is up-to-date but does not reference Chapter 10 of the Department Operations Manual.**

**#27   *Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure?* The Distance Learning and Education/Work Programs Alternative Education Delivery Models are in place. There are CVSP Form 607 records indicating that the Distance Learning and Independent Study positions were established. It is recommended that the Principal review position control records with the Institutional Personnel Officer to identify the Independent Study position. The Office of Correctional Education has a copy of the 607 establishing both positions. Also, it is recommended that the CVSP Principal discuss the implementation of the Education/Independent Study half-time models as described in the approved CCPOA Agreement with the appropriate Office of Correctional Education Associate Superintendent.**

**#28   *Are all Alternative Education Delivery Model positions filled?* There is no Independent Study program.**

**#29   *Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?* Some teachers do not have the proper duty statement.**

**#31   *Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas? Are all approved Alternative Education Delivery Model faculty schedules posted?* The Distance Learning Program does not have 120 participants. There are no Education/Independent Study Alternate Education Delivery Models in place. There are no approved Alternate Education Delivery Model faculty schedules posted.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**ADMINISTRATION SECTION**

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*#38 Does the Academic Vice-Principal/Vocational Vice-Principal provide documented In-Service Training and On-the-Job Training? Have all currently due probationary and annual performance evaluations been completed?* **Some annual performance evaluations are overdue.**

*#39 Are supervisors documenting their contact with staff and inmates that are involved in the bridging program?* **There is no documentation about supervisor/student contact. There is documentation of contact between Bridging Education Program staff and supervisors.**

*#46 Do academic, vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?* **The Distance Learning Alternate Education Delivery Model class has only 41 inmate participants instead of the required 120.**

*#52 Has the Transforming Lives Network satellite dish been installed and operational?* **Installed but not operational. There is a wiring problem.**

*#56 Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements? Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates?* **There is no High School credit program; the emphasis has been on the GED program.**

*#57 Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?* **The Inmate Education Advisory Committee has only met sporadically.**

*#58 Do all of the quarterly California Department of Corrections and Rehabilitation 128-E and 154 or other official student school transcripts reports contain current and appropriate information that includes credits earned, course completions? Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available) Does supervisory staff (Academic Vice-Principal/Vocational Vice-Principal) review these reports?* **Not all California Department of Corrections and Rehabilitation Form 154 cards were properly completed.**

*#59 Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation 154) transferred to Central Records when a student leaves education, transfers or paroles? Is a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) (or High School Transcript) kept in the Education Office files in perpetuity? Are Education Files prepared for all assigned inmates? Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and transferred to the General Population receiving institution?* **Some files with no Test of Adult Basic Education scores and some California Department of Corrections and Rehabilitation Form 154 Cards are not complete.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**ADMINISTRATION SECTION**

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*#62 Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?* **There is no Site Literacy Committee but there is an Education Literacy Committee that meets regularly.**

*#63 Does the Site Literacy Committee discuss the Bridging Program as part of its quarterly meetings?* **There is no Site Literacy Committee.**

*#64 Is the institution utilizing at least two alternate resources to implement literacy services for inmates?* **The only alternate resource is the Laubach Literacy Program.**

## ACADEMIC EDUCATION SECTION

## II. ACADEMIC EDUCATION:

## 76% COMPLIANCE

**Deficiency:**

**#1 Are all of the inmate students' job descriptions accurate, complete, signed, and available? Some of the teachers did not have job descriptions in their student files.**

**#3 Are all of the California Department of Corrections and Rehabilitation 128-E chronological reports, classroom records and timekeeping documents, current, accurate, and secure? On the minimum Yard none of the education folders had California Department of Corrections and Rehabilitation Form 128-E progress reports in them.**

**#8 Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) (or High School Transcript) in the Education File? None of the teachers give elective credits to those students that earn them. They also did not know about the California Department of Corrections and Rehabilitation approved high school curricula and diploma program.**

**#17 Are Test of Adult Basic Education testing protocols signed by current staff? The Testing Coordinator did not have a copy of the signed current protocols. He has the 2005 version. The test Coordinator said the Principal has a copy in his office.**

18 *Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?* **Testing materials are not secured according to the mandatory standards. Test materials are on all the yards in “Test Depots” in the vocational education areas and in academic classrooms. The teacher checks out test materials and checks them back in. The test materials were on an open shelf in one teacher’s office.**

#20 Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions? **The TABE coordinator has a binder but it is not current and needs to be updated.**

**#34 Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum? The Distance Learning Teacher's focus is on serving college students. The focus must be on OCE approved and funded classes, such as ABE I, II, III, General Education Development and High School subjects. Post secondary coordinators positions do not exist nor are they funded. The Distance Learning Teacher can serve a small percentage of college students. It is recommended more than 10-20% until a post-secondary position is funded through the Office of Correctional Education Budget Change Proposal process.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**ACADEMIC EDUCATION SECTION**

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#37 Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated? Is it given to the Vice-Principal and Principal on at least a weekly basis? **The inmate rosters are not given to the Vice-Principal and Principal on a weekly basis.**

#65 *Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?* **The Transforming Lives Network is not currently operational.**

#68 *Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?* **The Recreation Teacher is out on long term sick leave.**

#69 *Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?* **The Recreation Teacher is out on long term sick leave.**

#70 *Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?* **The Recreation Teacher is out on long term sick leave.**

#71 *Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?* **The Recreation Teacher is out on long term sick leave.**

#76  
*Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?* **The Recreation Teacher is out on long term sick leave.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**VOCATIONAL EDUCATION SECTION**

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**III. VOCATIONAL EDUCATION:                      78% COMPLIANCE**

**Deficiency:**

**#2** *Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?* **Some of the files were missing the Test of Adult Basic Education test scores.**

**#4** *Is the curriculum recording system in-use, accurate, and current?* **The Office Services teacher on D yard uses the older curriculum to teach typing, ten key etc. because computers for the program do not have the required Office Services and Related Technology software installed. The current Office Services and Related Technology curriculum is totally computer driven but only 5 computers have been loaded with required software. The Office Services and Related Technology computers on B yard also need PowerPoint and Access loaded in order to teach the curriculum. The required software needs to be installed on the remaining computers so that students can receive appropriate required training.**

**#6** *Are elective credits in the designated vocational subject being issued to inmates and recorded on the transcript?* **Teachers were unaware they could issue elective credits.**

**#7** *Are Trade/Industry Certifications being issued and recorded to those students earning them?* **The Office Services and Related Technology teacher can not issue completed certifications because the Microsoft test software is not loaded on the computers. Additionally only one teacher has received the certification training. It is recommended the Auto trades offer the ASE certification.**

**#9** *Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?* **Some of the programs do not have course outlines. Several of the programs, such as the Office Services and Related Technology program on B yard and the Auto Mechanics program on A yard, had very good course outlines. They are excellent examples of best practice that can be adopted by other classrooms.**

**#10** *Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?* **Some of the programs do not have course outlines. Several of the programs, such as the Office Services and Related Technology program on B yard and the Auto Mechanics program on A yard, had very good course outlines. They are excellent examples of best practice that can be adopted by other classrooms.**



## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### VOCATIONAL EDUCATION SECTION

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*#13 Are all of the vocational programs that have a nationally recognized certification programs participating in that program?* Only one of the Office Services Teachers has received Microsoft training to certify their students. Also the testing computers for Microsoft have not been loaded with the test software and installed in the Office Services classrooms. The Automotive Service Excellence certification is not being utilized for the automotive trades. There is a lack of material to provide training for the American Welding Society certification.

*#17 Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?* The welding class is unable to provide the hands-on training necessary for American Welding Society certification due to lack of materials, e.g. pipe. The Plasma Cutter needed to provide training has not been set up to run. The class has had the cutter for two years and it still is not operational.

*#33 Are current Test of Adult Basic Education subtests placed in student's file?* Several files from various programs did not have the Test of Adult Basic Education subtest.

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### LIBRARY/LAW LIBRARY SECTION

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#### IV. LIBRARY/LAW LIBRARY:

66% COMPLIANCE

**Deficiency:**

**#4** *Is there documentation of GP inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use, and is there a list showing inmates who request legal access, and those who received access?* **The records maintained are of all the use of law library materials – copies, books borrowed, etc. - not attendance. It is recommended that the Senior Librarian develop appropriate logs and train staff in their use.**

**#5** *If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library? Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?* **AdSeg inmates have a Law Library Electronic Delivery System (LLEDs) unit in their area per the Warden's orders. The additional required printed texts are not in the AdSeg unit. They must be requested. Technically, these AdSeg inmates do not have physical access to a complete mandated collection and are commonly paged. Inmates needing access to the law are placed in a cell with the Legal Library Electronic Data System computer. The Captain on the unit says he lacks staff to provide escort to the library and there are no law library study cells in the General Population libraries.**

**#8** *Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?* **The library does not receive Inmate Welfare Funds. Inmate Welfare Funds are used to purchase TV Guides for all the housing units.**

**#11** *Are law library discs checked in by the Associate Information Specialist Analyst? If not, who checks them in?* **The Senior Librarian checks all law library discs, not the Associate Information Specialist Analyst.**

**#16** *Does each library in the institution have at least one (1) textbook and two (2) supplemental titles which have copyright dates not more than ten (10) years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials?* **Senior Librarian sent a letter to all Education staff requesting a copy of their textbooks for the libraries. About 25% responded. The textbooks are kept in the main library and can be requested by satellite libraries for inmate check-out. The Senior Librarian plans to send another letter out soon to get more textbook copies. The Senior Librarian needs a good source for adult-interest/low- reading level materials. The Principal Librarian will assist him in this area. An excellent, wide ranging collection of multi-ethnic titles has been developed and integrated into the main catalog.**

## EXECUTIVE SUMMARY

Office of Audits and Compliance

Educational Compliance Branch

### LIBRARY/LAW LIBRARY SECTION

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*#17 Are book collections designed to meet the needs and interests of the inmate population served? Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box?* **The library does not maintain library advisory group meeting notes. However, the Senior Librarian constantly requests recommendations for book titles inmates would like to have in the library and follows through by purchasing them. The Senior Librarian talks informally with the Men's' Advisory Council advisory group but is never on their agenda. All libraries have wooden suggestion boxes prominently situated.**

*#18 Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation? Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding?* **The Senior Librarian is currently in the process of reconfiguring all the libraries and does not have a complete inventory available. The Senior Librarian has developed a unique circulation approach for his RRS collection. All the book titles are maintained in the main library. Every satellite library has a binder with a different assortment of cover titles of the RRS books. (These are rotated regularly.) Inmates request and receive the books through their yard libraries.**

*#20 Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter? Can inmates request books that are not in the library collection?* **There is an excellent master catalog listing all the books by author and title. Each satellite library has a similar book collection for their libraries and the master for intra-library loaning. Subject or genre catalogs should be developed. The master catalog should be reviewed so that fiction and non-fiction are not mixed. The Senior Librarian will order requested books if they are appropriate.**

*#22 Are the Gilmore v. Lynch mandated law books up to date? Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish? Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual? Are all of the Law Library Electronic Delivery System computers up-to-date and operating in each library?* **The Gilmore v. Lynch mandated law books deficiency is due to OCE delays. Some libraries are missing the Spanish issue. All Legal Library Electronic Data System computers are operational.**

*#28 Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee? Do inmate clerks receive training on a regular basis in law library and general library processes?* **No regular training is offered in law library and general library processes. The auditor recommends that a regular training program for law library and general library processes be established.**

*#29 Are personal alarms issued by institution to library staff; does library staff wear alarms; and are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?* **Not all exits are clearly marked and not all evacuation plans are up to date.**

**EXECUTIVE SUMMARY**  
**Office of Audits and Compliance                      Educational Compliance Branch**  
**FEDERAL GRANTS SECTION**

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**V. FEDERAL PROGRAMS:**

**99% COMPLIANCE**

**Workforce Investment Act Program:**

***Deficiency:***

*#28 Are spending levels appropriate for material purchases and training to support program needs? Mr. Hunt is not happy with the spending levels. This problem is a hindrance to his program.*

**COMMENTS ON THE FEDERAL GRANTS SECTION**

**IYO Program:**

***Deficiency:***

*#27(l) Uses DDPS disk to update IYO database? Institution does not provide access to the DDPS. Only the OBIS is used.*

**VTEA Program:**

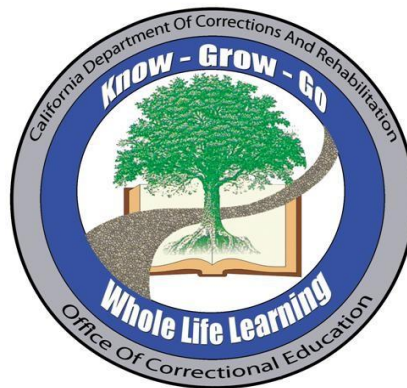
***No Deficiencies Noted.***



**DEPARTMENT OF CORRECTIONS AND REHABILITATION**

**OFFICE OF AUDITS AND COMPLIANCE**

**EDUCATIONAL COMPLIANCE BRANCH**



***COMPLIANCE REVIEW FINDINGS***

**Chuckawalla Valley State Prison**

**March 3 to 7, 2008**

**ADMINISTRATION**

**G. Lynn Hada**

**ACADEMIC EDUCATION**

**Raul Romero**

**John Jackson**

**VOCATIONAL EDUCATION**

**Beverly Penland**

**LIBRARY**

**Jan Stuter**

**FEDERAL SUPPLEMENTARY PROGRAMS**

**Mark Lechich**

**Ron Callison**

**Tom Posey**

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

No.	<b>INSTITUTION: Chuckawalla Valley State Prison (CVSP)</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: G. Lynn Hada</b>	Yes/No or N/A	<b>COMMENTS</b>
1.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Allotments/Operating Expenses:</b></div> <ul style="list-style-type: none"> <li>Does the Principal maintain a budget tracking system to monitor the school departments' complete budget?</li> <li>Is there an annual spending plan to determine sub-allotments to programs, expenditures and their balance?</li> </ul>	<b>Yes</b>	
2.	Based upon current policy (amount of budget allotted) does it appear that a viable spending plan is in place in order for allocated funds to be fully utilized by year end?	<b>Yes</b>	
3.	Are funds allocated by Office of Correctional Education available and spent within program areas?	<b>Yes</b>	
4.	Are funds tracked by funding source? General Fund, special Budget Change Proposal funding, Federal and State Grant Programs allocated by Office of Correctional Education?	<b>Yes</b>	
5.	Are allocated funds for the Bridging Education Programs including Arts In Corrections (AIC) used to provide program services to inmates?	<b>Yes</b>	
6.	Are law library purchases funded by the institution's general budget?	<b>No</b>	<p>There is an ongoing attempt by CDCR Administration to resolve the use of Program 25 vs. Program 45 monies to operate Law Libraries. The ongoing discussions to resolve this funding issue are taking place between Adult Operations and Adult Programs headquarters staff.</p>

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

7.	Is the school following the Education Hiring Steps and Responsibilities memo and matrix dated July 13, 2006 instructions when filling vacancies?	Yes	
8.	Are the Education Monthly Report (EMR) and the Education Daily Report (EDR) accurate and being completed and submitted on a timely basis?	Yes	
9.	Has adequate space and equipment been provided for staff to perform the required duties of the Reception Center/Bridging Education Program, Arts In Corrections program and the TV Specialist?	Yes	
10.	<b>Credentials:</b> Are all instructional and supervisory staff credentialed appropriately within subject matter area where they are assigned?	Yes	
11.	Does the assigned bridging staff hold appropriate credentials and/or placed in the appropriate Re-Entry classification?	Yes	
12.	<b>Duty Statements:</b> Are 100% of the staff duty statements on file and applicable to current position?	Yes	
13.	<b>Operational Procedures:</b> Does the institution have an Operational Procedure (OP) that addresses the legislative mandates of the Bridging Education Program?	Yes	



# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

14.	<ul style="list-style-type: none"> <li>Does the institution have an Operational Procedure for the Education Program?</li> <li>Does it use Department Operation Manual Chapter 10 as an inclusion?</li> </ul>	No	The Operational Procedure is up-to-date but does not reference Chapter 10 of the Department Operations Manual.
15.	<div style="background-color: #e0e0e0; padding: 2px;"><b>Staff Assignments:</b></div> <p>Does the Principal maintain a current and complete list of all authorized positions and their status?</p>	Yes	
16.	Are all staff appropriately working and/or assigned within the education program?	Yes	
17.	Do all staff within the education program report to, and are under the Principal's supervision?	Yes	
18.	Is the Bridging Education Program Reception Center/General Population/Arts In Corrections fully staffed with supervisory, instructional and ancillary personnel?	Yes	
19.	Are Re-Entry Program instructors, class code 7581, assigned only to the Bridging Education Program (BEP)?	Yes	
20	When Bridging Education Program vacancy occurs, is it immediately reclassified to class code 2290 Teacher, High School, General Education?	Yes	
21.	Has the Artist Facilitator been officially assigned to the Education Department?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

22.	Is there a system in place that is being utilized to ensure the tracking of inmates and their completed assignments during their transition from the Reception Center to the General Population Institution?	Yes	
23.	Has an individual been designated to be responsible for trouble-shooting the equipment and contacting Transforming Lives Network for needed support?	Yes	Brian Ingram, Electronics Technician in Plant Operations.
24	When there is a modified program, class closure, etc., is a plan in place to continue to deliver education services and other required educational activities and is the plan always implemented?	Yes	
25	Is the Assessment Office Assistant (OA) performing duties delineated in the Assessment OA duty statement?	Yes	
26.	<div style="border: 1px solid black; padding: 2px;">Alternative Education Delivery Model (AEDM):</div> Is an approved Alternative Education Delivery Model Operational Procedure in place?	Yes	Dated January 31, 2007.

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

27.	Are all of the Alternative Education Delivery Models being locally implemented at the institution in agreement with the California Correctional Peace Officers Association agreement and the institutional Operational Procedure?	No	The Distance Learning and Education/Work Programs Alternative Education Delivery Models are in place. There are CVSP Form 607 records indicating that the Distance Learning and Independent Study positions were established. It is recommended that the Principal review position control records with the Institutional Personnel Officer to identify the Independent Study position. The Office of Correctional Education has a copy of the 607 establishing both positions. Also, it is recommended that the CVSP Principal discuss the implementation of the Education/Independent Study half-time models as described in the approved CCPOA Agreement with the appropriate Office of Correctional Education Associate Superintendent.
28.	Are all Alternative Education Delivery Model positions filled?	No	There is no Independent Study program.
29.	Do all Alternative Education Delivery Model faculties have the approved Alternative Education Delivery Model Duty Statement with required signatures?	No	Some teachers do not have the proper Duty Statement.
30.	Are Alternative Education Delivery Model inmate enrollments/assignments being made based on eligibility criteria of the enrollments/assignment as defined in the course descriptions and guidelines?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

31.	<ul style="list-style-type: none"> <li>Are all Alternative Education Delivery Model Programs operating as full-time programs that meet the program-wide quotas?</li> <li>Are all approved Alternative Education Delivery Model faculty schedules posted?</li> </ul>	No	The Distance Learning Program does not have 120 participants. There are no Education/Independent Study Alternate Education Delivery Models in place. There are no approved Alternate Education Delivery Model faculty schedules posted.
32.	<div style="border: 1px solid black; padding: 2px;"><b>Gender Responsive Strategies:</b></div> <p>Has all education staff received Gender Responsive Strategies training provided by the Female Offender Programs (FOP) institutional administration?</p>	N/A	
33.	Are female inmates' vocational assignments being made based on the eligibility criteria of the vocational assignment as defined in the course descriptions and vocational guidelines?	N/A	
34.	<div style="border: 1px solid black; padding: 2px;"><b>Certificates of Completion or Achievement:</b></div> <ul style="list-style-type: none"> <li>Are Certificates of Vocational or Academic Life Skills Completion being issued to those students earning them and recorded on a tracking system?</li> <li>Are Certificates of Achievement issued to those students who exit the program before the Certification of Completion is earned?</li> </ul>	Yes	
35.	<div style="border: 1px solid black; padding: 2px;"><b>Executive/Supervisory Assignments:</b></div> <p>Are documented staff meetings held regularly by Principal, Academic Vice Principal (AVP), and Vocational Vice Principal (VVP)? (monthly or more)</p>	Yes	
36.	Is the Principal a member of the Warden's Executive Staff?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

37.	Does all supervisory staff conduct and record classroom visitations and observations on a quarterly basis?	Yes	
38.	<ul style="list-style-type: none"> <li>Does the AVP/VVP provide documented IST and OJT?</li> <li>Are all probationary and annual performance evaluations currently due completed?</li> </ul>	No	Some annual performance evaluations are overdue.
39.	Are supervisors documenting their contact with staff and inmates involved in the bridging program?	No	There is no documentation about supervisor/student contact. There is documentation of contact between Bridging Education Program staff and supervisors.
40.	Are Transforming Lives Network quarterly reports being submitted to Office of Correctional Education by the due dates of Oct. 10, January 10, April 10 and July 10?	Yes	
41.	<div style="border: 1px solid black; padding: 2px;"><b>Test of Adult Basic Education:</b></div> <ul style="list-style-type: none"> <li>Is the Principal trouble shooting Test of Adult Basic Education score losses identified on the School Program Assessment Report Card (SPARC)?</li> <li>Is the principal implementing remedial changes to improve the scores?</li> </ul>	Yes	
42.	Is there a 4.0 reading level report generated and distributed to appropriate staff?	Yes	
43.	Is a list of inmates who have a verified Learning Disability generated and distributed to appropriate staff?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

44.	<b>Accreditation:</b>  Has the education program been accredited by Western Association of Schools and Colleges (WASC), or has the application for accreditation been submitted to Western Association of Schools and Colleges?	Yes	
45.	<ul style="list-style-type: none"> <li>Is there a continuing Western Association of Schools and Colleges process being followed by the school with the action plans being actively addressed in a timely manner?</li> <li>Is there a leadership team in place and do minutes substantiate regular meetings?</li> </ul>	Yes	
46.	<b>Inmate Enrollment/Attendance:</b>  Do academic, vocational, Bridging Education Program, Enhanced Outpatient Program and Alternative Education Delivery Model enrollments meet the required program quotas (15:1, 27:1, 54:1, 120:1)?	No	The Distance Learning Alternate Education Delivery Model class has only 41 inmate participants instead of the required 120.
47.	Has the Institution developed an eligibility list for assigning inmates to the Bridging Education Program?	Yes	However the principal did not have a copy and did not know it was available in the Inmate Assignment Office.
48.	Does the Principal maintain a copy of the current inmate assignment waiting list?	Yes	
49.	Is education staff attending Institution Classification Committee (ICC) meetings for input into the placement of inmates into education programs?	Yes	
50.	<b>Bridging Program:</b>  Has the teaching staff met with each inmate upon assignment to the Bridging Education Program?	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

51.	Are all Bridging Education Program eligible inmates receiving an education orientation packet upon arrival to the housing unit?	N/A	Only applies to Reception Centers.
52.	<div style="border: 1px solid black; padding: 2px;"><b>Transitional Living Network (TLN):</b></div> Has the Transforming Lives Network satellite dish been installed and operational?	No	Installed but not operational. There is a wiring problem.
53	Is the Literacy Coordinator (Academic Vice-Principal) designated as the Transforming Lives Network Coordinator?	Yes	
54.	Do the number of inmates being enrolled and the number completing Transforming Lives Network courses agree with the numbers reported to Office of Correctional Education?	Yes	
55.	Has Transforming Lives Network enrollment and completion data been tracked?	Yes	
56.	<div style="border: 1px solid black; padding: 2px;"><b>GED Testing/High School Credit:</b></div> <ul style="list-style-type: none"> <li>Is there a High School credit program and General Educational Development (GED) Testing program that follows Office of Correctional Education and State requirements?</li> <li>Are High School Diplomas and GED Equivalency Certificates issued to qualified inmates?</li> </ul>	No	There is no High School credit program; the emphasis has been on the GED program.
57.	<div style="border: 1px solid black; padding: 2px;"><b>Inmate Education Advisory Committee:</b></div> Is there an Inmate Education Advisory Committee established with regularly scheduled monthly meetings?	No	The Inmate Education Advisory Committee has only met sporadically.

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

58.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Education Files</b></div> <ul style="list-style-type: none"> <li>Do all of the quarterly California Department of Corrections and Rehabilitation Forms 128E and 154 or other official student school transcripts reports contain current and appropriate information that includes credits earned, course completions?</li> <li>Does the appropriate instructional staff sign all of the above reports? (Supervisory staff when instructional staff is not available.)</li> <li>Does supervisory staff (AVP/VVP) review these reports?</li> </ul>	<b>No</b>	Not all California Department of Corrections and Rehabilitation Form 154 cards were properly completed.
59.	<ul style="list-style-type: none"> <li>Are Education Files with a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation 154) transferred to Central Records when a student leaves education, transfers or paroles?</li> <li>Is a copy of the Record of Inmate Achievement (California Department of Corrections and Rehabilitation 154) (or High School Transcript) kept in the Education Office files in perpetuity?</li> <li>Are Education Files prepared for all assigned inmates?</li> <li>Are Bridging Education Program Education Files prepared for all assigned bridging students in the Reception Center and transferred to the General Population receiving institution?</li> </ul>	<b>No</b>	Some files with no Test of Adult Basic Education scores and some California Department of Corrections and Rehabilitation Form 154 Cards are not complete.
60.	<ul style="list-style-type: none"> <li>Are there any contracted, Office of Correctional Education sponsored or special programs operating at the institution?</li> <li>If so have the teachers assigned to these programs received special/related training?</li> </ul>	<b>Yes</b>	IYO
61.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Literacy:</b></div> <p>Are literacy programs available to at least 60% of the eligible prison population?</p>	<b>Yes</b>	Eighty-two percent of literacy eligible inmates have access to literacy training.
62.	Is there an active Site Literacy Committee that meets and documents quarterly meetings, and is it coordinated by the Principal or an Academic Vice-Principal?	<b>No</b>	There is no Site Literacy Committee but there is an Education Literacy Committee that meets regularly.



# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

63.	Does the Site Literacy Committee discuss the Bridging Education Program as part of its quarterly meetings?	No	There is no Site Literacy Committee.
64.	Is the institution utilizing at least two alternate resources to implement literacy services for inmates?	No	The only alternate resource is the Laubach Literacy Program.
65.	Is there an established procedure for placing students into any existing Learning Literacy (LLL) lab? (a federally or non-federally funded Computer Aided Instruction /Plato/Computer Lab)	Yes	Assigned by the Inmate Assignment Office.
66.	<div style="border: 1px solid black; padding: 2px;"><b>Developmental Disability Program and Disability Placement Program Programs:</b></div> <p>If this is a Developmental Disability Program and/or a Disability Placement Program site, does the principal have the required documentation that demonstrates adherence to the Court Remedial Plans and California Department of Corrections and Rehabilitation/Office of Correctional Education policies?</p>	N/A	
67.	<div style="border: 1px solid black; padding: 2px;"><b>ESTELLE/Behavior Modification Programs:</b></div> <p>Is documentation available regarding the original operational intent/concept of the Estelle/Behavior Modification Unit Program and are there actual implementations of the program/programs?</p>	N/A	
68.	Is there an Estelle/Behavior Modification Unit Program monitoring and tracking process in place to record to record student progress through achievement/progress, data collection, instructional methods, and curriculum?	N/A	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

69.	<div> <b>Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:</b> </div> <p>Is there an approved Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Operational Procedure (OP)?</p>	N/A	
70.	Are all Recidivism and Reduction Strategy (RRS) assessment positions filled?	N/A	
71.	Are all other designated assessment positions filled? Is there a designated supervisor over the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	
72.	Do all designated assessment staff have an individual Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) log-on code? Is the security of the code maintained?	N/A	
73.	Does the assessment staff maintain appropriate security of laptop and/or stand-alone computers utilized for the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Risk and Needs Assessment Program?	N/A	
74.	<div> <b>Recidivism Reduction Strategies:</b> </div> <ul style="list-style-type: none"> <li>Is there a Recidivism Reduction Strategies expenditure tracking log maintained by the Principal for the purposes of identifying equipment or materials purchase or provided to the institution for assessments as identified in the Recidivism Reduction Strategies Budget Change Proposal (BCP)?</li> <li>Are inventories of Recidivism Reduction Strategies equipment maintained and current?</li> </ul>	Yes	

# COMPLIANCE REVIEW FINDINGS

## EDUCATION ADMINISTRATION SECTION

75.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Recidivism Reduction Strategies Enhanced Outpatient Program:</b></div> <p>Are all Enhanced Outpatient Program staff hired and in place?</p>	N/A	
76.	<p>Does the Principal (via the Academic Vice Principal) supervise the Enhanced Outpatient Program Teacher(s) in accordance with California Department of Corrections and Rehabilitation policy?</p>	N/A	
77.	<p>Have the Enhanced Outpatient Program Teacher(s) received training in performing the required duties as described in the Enhanced Outpatient Program Duty Statement?</p>	N/A	
78.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Multi-Agency Re-entry Program (SB 618):</b></div> <p>Has the institution interviewed and hired for the Prison Case Manager positions as members of the Multi-Disciplinary team?</p>	N/A	
79.	<p>Are the four vocational programs referenced in Senate Bill 618 in place at the institution?</p>	N/A	
80.	<p>Has a documentation process been established to monitor inmate contact time as well as inmate growth and completion of program?</p>	N/A	
81.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Vocational-Recidivism Reduction Strategies</b></div> <p>Are all original vocational Recidivism Reduction Strategies (RRS) teacher positions filled and are all classrooms operating?</p>	N/A	
82.	<p>Are all Recidivism Reduction Strategies vocational classes at full enrollment?</p>	N/A	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

NO.	<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Raul Romero, John Jackson</b>	YES/NO or N/A	<b>COMMENTS</b>
1.	<div style="border: 1px solid black; padding: 2px;"><b>Student Job Descriptions:</b></div> <p>Are all of the inmate students' job descriptions accurate, complete, signed, and available?</p>	<b>No</b>	Some of the teachers did not have student job descriptions in the student files.
2.	<div style="border: 1px solid black; padding: 2px;"><b>Student Records/Achievements:</b></div> <p>Do all the of classroom files reflect Test of Adult Basic Education scores that are being administered according to the quarterly testing matrix and that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan criteria and Office of Correctional Education Test of Adult Basic Education testing requirements?</p>	<b>Yes</b>	
3.	<p>Are all of the California Department of Corrections and Rehabilitation 128-E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?</p>	<b>No</b>	On the minimum Yard none of the education folders had California Department of Corrections and Rehabilitation Form 128-E progress reports in them.
4.	<p>Is 100% of the California Department of Corrections and Rehabilitation curriculum recording system in-use, accurate, and current?</p>	<b>Yes</b>	
5.	<p>Do 100% of the Permanent Class Record Cards (California Department of Corrections and Rehabilitation-151 form) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time for 4-10 programs for traditional classes?</p>	<b>Yes</b>	
6.	<p>Are Certificates of Completion or Achievement being issued to those students earning them?</p>	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

7.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;"><b>Instructional Expectations:</b></div> <p>Do all of the academic education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation approved curriculum?</p>	<b>Yes</b>	
8	<p>Are the required and/or elective credits in the academic subject being taught issued to inmates and recorded on the Record of Inmate Achievement (California Department of Corrections and Rehabilitation Form 154) (or High School Transcript) in the Education File?</p>	<b>No</b>	<p>None of the teachers give elective credits to those students that earn them. They also did not know about the California Department of Corrections and Rehabilitation approved high school curricula and diploma program.</p>
9.	<p>Do all of the academic education classes have course outlines that agree with the California Department of Corrections and Rehabilitation approved curriculum?</p>	<b>Yes</b>	<p>One of the teachers on A-yard had an exceptional course outline and exceptional student file folders.</p>
10.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;"><b>Bridging Education Program Instructional Expectations:</b></div> <p>Is each teacher utilizing the established curriculum for Bridging Education Program and does each teacher have a copy of the curriculum?</p>	<b>Yes</b>	
11.	<p>Are the Test of Adult Basic Education and Comprehensive Adult Student Assessment System being Administered to Bridging Students? Are other assessments being used to assess the inmate job skills?</p>	<b>Yes</b>	
12.	<p>Does Bridging Education Program teacher utilize the proper Permanent Class Record Card (California Department of Corrections and Rehabilitation 151 form) that is up to date and accurate?</p>	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

13.	Has the Bridging Education Program teacher developed a written weekly schedule to include student programs and contacts?	Yes	However, some of the Bridging Education Program teachers are not spending sufficient time with students that need assistance. The student contact is flexible to provide one on one instruction or small group instruction to those with the greatest needs.
14.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Test of Adult Basic Education Testing Coordinator:</b> </div> Are gain/loss reports (School Progress Assessment Report Card) and the Test of Adult Basic Education sub-test reports reviewed/shared with the education supervisors?	Yes	
15.	Does the Test of Adult Basic Education Coordinator and at least two others have access to a California Department of Corrections and Rehabilitation email address and user account?	Yes	
16.	Does the Test of Adult Basic Education Coordinator have the most recent Test of Adult Basic Education database (within a week)?	Yes	
17.	Are Test of Adult Basic Education testing protocols signed by current staff?	No	The Testing Coordinator did not have a copy of the signed current protocols. He has the 2005 version. The test Coordinator said the Principal has a copy in his office.
18.	Are the Test of Adult Basic Education testing materials secured in a locked cabinet (mandatory standards)?	No	Testing materials are not secured according to the mandatory standards. Test materials are on all the yards in "Test Depots" in the vocational education areas and in academic classrooms. The teacher checks out test materials and checks them back in. The test materials were on an open shelf in one teacher's office.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

19.	Is a master inventory of Test of Adult Basic Education test booklets and answer sheets maintained by the testing coordinator?	Yes	For accountability, all tests materials must be kept on the master inventory even when destroyed and label per their disposition.
20.	Is the Test of Adult Basic Education binder current and up-to-date with memos, purchase orders and instructions?	No	The TABE coordinator has a binder but it is not current and needs to be updated.
21.	Is the Test of Adult Basic Education locator test being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	Yes	It is used and available for the teachers to use.
22.	<div>Teacher-Test of Adult Basic Education Testing</div> Are teachers testing within 10 days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?	Yes	
23.	Are the Test of Adult Basic Education tests administered according to the testing matrix?	Yes	
24.	Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?	Yes	The teachers are using the locator test as needed.
25.	Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?	Yes	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

26.	Are teachers using the Test of Adult Basic Education pre-post diagnostic subtest test results as a diagnostic tool for individualized instruction and troubleshooting Test of Adult Basic Education score losses in their classes?	Yes	
27.	Are current Test of Adult Basic Education subtests placed in student's file?	Yes	
28.	<div>Alternative Education Delivery Model:</div> Are Alternative Education Delivery Model Open Line schedules with dates and times posted in public areas for inmate access to educational services during off work hours?	Yes	
29.	Are the Television Specialist and Distance Learning Study Teacher developing a Distance Learning Study Channel schedule of courses, with dates and times, posted in public areas for inmates to review and complete their assignments?	Yes	
30.	Does the Television Specialist plan, supplement and implement electronic educational coursework with the Distance Learning Study teacher, utilizing Transforming Lives Network and airing educational programs such as Kentucky Educational TV General Education Development series on a weekly basis?	Yes	Because the Transforming Lives Network is not currently operational, only the General Education Development series is being implemented.
31.	Are teachers awarding inmates certificates for achievement/completion in Alternative Education Delivery Model programs?	Yes	



# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

32.	Do all of the Education/Independent Study (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	
33.	Do all of the Education/Work Program (half-time) classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	Yes	
34.	Do all of the Distance Learning classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	No	The Distance Learning Teacher's focus is on serving college students. The focus must be on OCE approved and funded classes, such as ABE I, II, III, General Education Development and High School subjects. Post secondary coordinators positions do not exist nor are they funded. The Distance Learning Teacher can serve a small percentage of college students. It is recommended more than 10-20% until a post-secondary position is funded through the Office of Correctional Education Budget Change Proposal process.
35.	Do all of the Independent Study classes have current course outlines and lesson plans that agree with the Office of Correctional Education approved curriculum?	N/A	
36.	<ul style="list-style-type: none"> <li>Are teachers testing inmates within 10 days of being enrolled or assigned to an Alternative Education Delivery Model program?</li> <li>Are the inmates' Test of Adult Basic Education subtest results analyzed by the teacher for appropriate Alternative Education Delivery Model lesson/class placement?</li> </ul>	Yes	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

37.	<ul style="list-style-type: none"> <li>Is the Alternative Education Delivery Model current enrolled/assigned inmate roster consistently kept updated?</li> <li>Is it given to the Vice-Principal and Principal on at least a weekly basis?</li> </ul>	No	The inmate rosters are not given to the Vice-Principal and Principal on a weekly basis.
38.	Are students' gains being recorded and tracked?	Yes	
39.	<b>Gender Responsive Strategies:</b>  Do all of the academic life skills classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies (GRS) approved curriculum, i.e.? Women's Conflict and Anger Lifelong Management (W-CALM) (Feb. 2007), Women's Health (July 2007), Women's Parenting (January 2008) Women's Victims (July 2008)?	N/A	
40.	Do all of the academic life skills classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	
41.	<b>ESTELLE and Behavior Modification Unit programs:</b>  Is there an effective system in place to track monthly attendance, reporting, and evaluation of assigned inmates, their performance; and participation that allows a clear over-all rating of progress of each student in the Behavior Modification Unit/ESTELLE program?	N/A	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

42.	Is there a tracking and evaluation process to determine inmate progress on the Behavior Modification Unit curriculum competencies including Conflict and Anger Lifelong Management and is documentation provided to the Unit Classification Committee every 30 days detailing how the inmates assigned to the Behavior Modification Unit program are performing?	N/A	
43.	<ul style="list-style-type: none"> <li>Do ESTELLE students have access to computers as required in the framework of the program for training?</li> <li>Does the teacher have Test of Adult Basic Education scores on all of the students in the program?</li> </ul>	N/A	
44.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) – Risk and Needs Assessment:</b> </div> Are assessment teachers conducting assessments on eligible inmates as defined by the current Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Operations Manual?	N/A	
45.	Does assessment staff utilize the current standardized Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) Tracking Form?	N/A	
46.	Are the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) questionnaires shredded daily in accordance with confidential document procedure?	N/A	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

47.	Are assessment interviews conducted in a semi-private environment?	N/A	
48.	Is appropriate assistance provided to inmates during participation in the Correctional Offender Management Profiling for Alternative Sanctions (COMPAS) assessment interview in accordance with departmental policies regarding Effective Communication, the Clark Remedial Plan, and Armstrong mandates?	N/A	
49.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;"><b>Security and Order:</b></div> <p>Are personal alarms issued to teachers and do they wear whistles and the personal alarms on their person?</p>	Yes	All of the teachers had their whistles in the right place; attached to their upper body.
50.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
51.	<div style="border: 1px solid black; background-color: #f2f2f2; padding: 2px;"><b>Pre-Release</b></div> <p>Does the Pre-Release curriculum contain Life Skills; Communication Skills; Attitude and Self-Esteem; Money Management; Community Resources; Job Application Training; Department of Motor Vehicles Practice Test; and Parole Services?</p>	Yes	
52.	Do all of the Pre Release lesson plans contain the objective, handouts, and methods for student evaluation?	Yes	
53.	Is the Pre-Release teacher receiving appropriate institutional and Parole and Community Services Division (P&CSD) staff support?	Yes	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

54.	Is the Pre-Release curriculum recording system in-use, accurate, and current and are copies of monthly records maintained?	Yes	
55.	Does the Pre-Release instructor use a variety of teaching methodologies and allow for differentiation of instruction to meet individual learners' needs?	Yes	
56.	Is the Pre-Release class a full-time program (4 days/8.5, 5 days 6.5 hours)? If no, is there an exemption on file?	Yes	
57.	Are all of California Department of Corrections and Rehabilitation 128-E's, completion chronos and classroom records current and accurate and reflecting a full quota student enrollment?	Yes	
58.	Does the Pre-release Teacher use the Framework for Breaking Barriers?	Yes	
59.	Does the Pre-release teacher provide the Office of Correctional Education with monthly Pre-release reports on time and maintain copies of those Monthly Pre-release reports?	Yes	
60.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Recidivism Reduction Strategies Enhanced Outpatient Program Program:</b> </div> Is the Enhanced Outpatient Program Teacher a participating member of the Interdisciplinary Treatment Team (IDTT) meetings?	N/A	
61.	Is there a current roster of Enhanced Outpatient Program inmates determined eligible by Interdisciplinary Treatment Team (IDTT) and the Enhanced Outpatient Program teacher to receive education services?	N/A	

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

62.	Is the required student assessment for development of the Individualized Treatment and Education Plan completed in accordance with the Enhanced Outpatient Program assessment guidelines timelines?	N/A	
63.	Is there documentation of the education services provided to Enhanced Outpatient Program inmates?	N/A	
64.	<div style="border: 1px solid black; padding: 2px;"><b>Transforming Lives Network Program:</b></div> <p>Are alternate modalities available for use within the housing units for the Distance Learning program? For example, video, Transitional Living Network, institutional television, visual worksheets, etc.?</p>	Yes	
65.	Is the television specialist recording Transforming Lives Network broadcasting and archiving copies for re-broadcast and individual teacher access?	No	The Transforming Lives Network is not currently operational.
66.	Is the television specialist setting up a broadcast schedule for the school and distributing that schedule to the school faculty?	Yes	
67.	Are school faculty members given the opportunity to provide input into the broadcast schedule?	Yes	
68.	<div style="border: 1px solid black; padding: 2px;"><b>Recreation/Physical Education (P.E.):</b></div> <p>Is there a current and comprehensive activity schedule for the Recreation and/or Physical Education Program?</p>	No	The Recreation teacher is out on long term sick leave.
69.	Does the Physical Education teacher follow the California Department of Corrections and Rehabilitation approved selection process for movies?	No	The Recreation teacher is out on long term sick leave.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

70.	Does the Physical Education teacher have sign-up sheets, team rosters, or other evidence of inmate participation in sports and health education activities?	No	The Recreation teacher is out on long term sick leave.
71.	Is California Department of Corrections and Rehabilitation-approved State frameworks curriculum being used and are course outlines present?	No	The Recreation teacher is out on long term sick leave.
72.	Are health education, physical fitness training and recreational activities being provided to the Special Needs populations?	N/A	
73.	Does the Physical Education teacher have a system in place to ensure accountability for state property including sports equipment, clothing and supplies?	Yes	The system is in place even though the teacher is on Long Term Sick status.
74.	Are there sufficient supplies, such as board games and sports equipment, to ensure a viable Physical Education program?	Yes	
75.	Are time-keeping records (California Department of Corrections and Rehabilitation Form 1697) on inmates assigned to work for the Physical Education teacher being kept?	N/A	No inmates are assigned to the Physical Education teacher.
76.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"> <b>Recidivism Reduction Strategies (Physical Education):</b> </div> Are health education, physical fitness training and recreational activities being provided to the geriatric population (age 55 and over)?	No	The Recreation teacher is out on long term sick leave.

# COMPLIANCE REVIEW FINDINGS

## ACADEMIC EDUCATION SECTION

77.	Have the funds for the Recidivism Reduction Strategies funds for the geriatric population been expended for the geriatric population?	Yes	
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# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

NO.	INSTITUTION: CVSP DATE: March 3-7, 2008 COMPLIANCE TEAM: Beverly Penland, Ron Callison	YES/NO N/A	COMMENTS
1.	<b>Student Job Description:</b>  Are all of the inmate students' job descriptions accurate, complete, signed, and available?	Yes	
2.	<b>Student Records/Achievements:</b>  Do all of classroom files reflect Test of Adult Basic Education scores that are not over six months old for students under the California Department of Corrections and Rehabilitation Literacy Plan and Office of Correctional Education Test of Adult Basic Education testing criteria?	No	Some of the files were missing the Test of Adult Basic Education test scores.
3.	Are all of the California Department of Corrections and Rehabilitation 128-E chronological reports, classroom records and timekeeping documents, current, accurate, and secure?	Yes	
4.	Is the curriculum recording system in-use, accurate, and current?	No	The Office Services teacher on D yard uses the older curriculum to teach typing, ten key etc. because computers for the program do not have the required Office Services and Related Technology software installed. The current Office Services and Related Technology curriculum is totally computer driven but only 5 computers have been loaded with required software. The Office Services and Related Technology computers on B yard also need PowerPoint and Access loaded in order to teach the curriculum. The required software needs to be installed on the remaining computers so that students can receive appropriate required training.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

5.	Does the Permanent Class Record Card (California Department of Corrections and Rehabilitation Form 151) reflect the minimum student contact time of 6.5 hours x-time or 8.5 hours of x-time (on full days) for 4-10 programs?	Yes	
6.	Are elective credits in the designated vocational subject being issued to students and recorded on their transcript?	No	Teachers were unaware they could issue elective credits.
7.	Are Trade/Industry Certifications being issued and recorded to those students earning them?	No	The Office Services and Related Technology teacher can not issue completed certifications because the Microsoft test software is not loaded on the computers. Additionally only one teacher has received the certification training. It is recommended the Auto trades offer the ASE certification.
8.	Are Certificates of Completion or Achievement being issued and recorded for those students earning them?	Yes	
9.	<div style="border: 1px solid black; padding: 2px;"><b>Instructional Expectations:</b></div> Do all of the vocational education classes have course outlines that agree with the California Department of Corrections and Rehabilitation curriculum?	No	Some of the programs do not have course outlines. Several of the programs, such as the Office Services and Related Technology program on B yard and the Auto Mechanics program on A yard, had very good course outlines. They are excellent examples of best practice that can be adopted by other classrooms.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

10.	Do all of the vocational education classes have lesson plans that agree with the California Department of Corrections and Rehabilitation curriculum?	No	Some of the programs do not have course outlines. Several of the programs, such as the Office Services and Related Technology program on B yard and the Auto Mechanics program on A yard, had very good course outlines. They are excellent examples of best practice that can be adopted by other classrooms.
11.	Have the Literacy Implementation Plan sections (applicable to Vocational Education) been incorporated through a core set of literacy materials into the instructional plan and do lesson plans verify this?	Yes	
12.	Are Vocational Instructors conducting and documenting at least 4 hours of approved related formal classroom training each week for all inmate students?	Yes	
13.	Are all of the vocational programs that have a nationally recognized certification programs participating in that program?	No	Only one of the Office Services Teachers has received Microsoft training to certify their students. Also the testing computers for Microsoft have not been loaded with the test software and installed in the Office Services classrooms. The Automotive Service Excellence certification is not being utilized for the automotive trades. There is a lack of material to provide training for the American Welding Society certification.
14.	<div style="border: 1px solid black; padding: 2px;"><b>Recidivism Reduction Strategies:</b></div> Is the Recidivism Reduction Strategies program instruction issuing trade certifications and/or National Center for Construction Education and Research (NCCER) certifications?	Yes	National Center for Construction Education and Research.

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

15.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>National Center for Construction Education and Research:</b></div> <p>Is all the National Center for Construction Education and Research (NCCER) accreditation guidelines for Standardized Training being used?</p>	<b>Yes</b>	
16.	<p>Are the Building Construction Trades using the Contren Learning Series text books as the primary classroom text book?</p>	<b>Yes</b>	
17.	<p>Do all of the National Center for Construction Education and Research instructors have the resources needed to effectively teach the related trades?</p>	<b>No</b>	<p>The welding class is unable to provide the hands-on training necessary for American Welding Society certification due to lack of materials, e.g. pipe. The Plasma Cutter needed to provide training has not been set up to run. The class has had the cutter for two years and it still is not operational.</p>
18.	<p>Are all of the building trade instructors currently National Center for Construction Education and Research Certified Instructors and have attended the Instructor Certification Training Program (ICTP)?</p>	<b>Yes</b>	
19.	<p>Are all of the craft instructors maintaining and conducting record keeping as outlined in the National Center for Construction Education and Research Accreditation Guidelines?</p>	<b>Yes</b>	
20.	<p>Are all of the instructors maintaining the confidentiality and maintain restricted access to inmate social security numbers used on the National Center for Construction Education and Research Form 200's?</p>	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

21.	Are all of the written National Center for Construction Education and Research tests, National Center for Construction Education and Research test CD-ROMs and National Center for Construction Education and Research answer keys maintained in a secure locked location with an inventory of the tests on hand?	Yes	
22.	Are all of the students evaluated based on a 70% minimum passing score on National Center for Construction Education and Research written examinations?	Yes	
23.	Are those students that fail a National Center for Construction Education and Research written test or practical exam required to wait a minimum of 48 hours prior to being retested?	Yes	
24.	Are 90% or more of the students completing the first six National Center for Construction Education and Research CORE Modules prior to starting the Level 1 for the trade?	Yes	
25.	Are all National Center for Construction Education and Research performance evaluations conducted for each module and a record of the Performance Profile Sheet maintained?	Yes	
26.	Upon successful completion of the National Center for Construction Education and Research written and performance evaluation, is the instructor documenting and submitting the Form 200 to the Unit Training Representative (UTR) for signature and forwarding to Office of Correctional Education?	Yes	
27.	Are all of the instructors accepting National Center for Construction Education and Research Modules and Completion Certifications issued prior to students being assigned to the vocational class?	Yes	

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

28.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Test of Adult Basic Education TESTING</b></div> <p>Are teachers testing within ten days of the student's initial entry into the classroom, as well as quarterly testing based on the Test of Adult Basic Education matrix?</p>	<b>Yes</b>	
29.	<p>Are the Test of Adult Basic Education tests administered according to the testing matrix?</p>	<b>Yes</b>	
30.	<p>Is the Test of Adult Basic Education locator being used when needed to determine which level appropriate Test of Adult Basic Education test to administer?</p>	<b>Yes</b>	
31.	<p>Are teachers using Test of Adult Basic Education pre-post subtest diagnostic reports for student needs assessment and are they reviewing test scores with inmates?</p>	<b>Yes</b>	
32.	<p>Are teachers using the Test of Adult Basic Education test results as a diagnostic tool for individualized instruction and trouble shooting Test of Adult Basic Education score losses in their classes?</p>	<b>Yes</b>	
33.	<p>Are current Test of Adult Basic Education subtests placed in student's file?</p>	<b>No</b>	<p>Several files from various programs did not have the Test of Adult Basic Education subtest.</p>
34.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Gender Responsive Strategies:</b></div> <p>Do all or more of the Gender Responsive Strategies (GRS) vocational classes have current course outlines that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum, i.e. Cosmetology, Mill &amp; Cabinet, Cable Technician, etc.?</p>	<b>N/A</b>	

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

35.	Do all or more of the vocational classes have current lesson plans that agree with the Office of Correctional Education/Gender Responsive Strategies approved curriculum?	N/A	
36.	<div style="border: 1px solid black; background-color: #e0e0e0; padding: 2px;"><b>Security and Order:</b></div> Are personal alarms issued by institution to instructors and do they wear a whistle and the personal alarms on their person?	Yes	
37.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	Yes	
38.	Is there an Inmate Safety Committee that conducts and records weekly safety inspections?	Yes	
39.	Are safety meetings being held and documented?	Yes	

# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

40.	<b>Trade Advisory Committee:</b>  Does the instructor have a documented, Trade Advisory Committee that meets at least quarterly?	Yes	It is very difficult to hold Trade Advisory Committee meetings under the current teachers' contract that require teachers to keep classrooms open under all non-emergency circumstances or leave activities not covered by the contract. Most instructors are keeping in touch with Trade Advisory Committee members through phone calls. The teachers feel a need to have contact with committee members and have member interaction with students. It is recommended that the CVSP Principal make it known to the Office of Correctional Education that there is a need for substitute teachers thus supporting Office of Correctional Education efforts to obtain teacher relief funding/
41.	<b>Job Market Analysis:</b>  Is a current Employment Development Department Job Market Analysis and/or institutional Job Market Survey on file?	Yes	
42.	<b>Apprenticeship:</b>  Is there an active Apprenticeship Training Program?	N/A	
43.	If yes, do inmates meet apprenticeship requirements and receive pay?	N/A	
44.	Does the instructor have a documented active Joint Apprenticeship Committee that meets at least quarterly within the institution?	N/A	



# COMPLIANCE REVIEW FINDINGS

## VOCATIONAL EDUCATION SECTION

45.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Employee and Community Services Programs.</b></div> <p>If vocational education programs are participating in Employee Services Programs, are they meeting Department Operation Manual and Penal Code requirements?</p>	Yes	
46.	<p>If vocational education programs are participating in community service projects, are they meeting Department Operation Manual requirements?</p>	Yes	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

NO .	INSTITUTION: CVSP DATE: March 3-7, 2008 COMPLIANCE TEAM: Jan Stuter	YES/NO or N/A	COMMENTS
1.	<div data-bbox="159 380 899 422" style="background-color: #e0e0e0;"><b>Library Staffing:</b></div> <ul style="list-style-type: none"> <li>Does the Principal, Academic Vice-Principal, or Vocational Vice-Principal supervise the library staff?</li> <li>Does the Senior Librarian implement/plan the library program?</li> </ul>	Yes	The Academic Vice-Principal supervises the library staff the Senior Librarian implements/plans the library program.
2.	<div data-bbox="159 678 899 751" style="background-color: #e0e0e0;"><b>Department Operation Manual and Department Operation Manual Supplement:</b></div> <ul style="list-style-type: none"> <li>Is the current Department Operation Manual, Section 53060 available in main library (ies) and satellite library (ies)?</li> <li>Is there a Department Operation Manual library supplement that is brief, and contains no new policies and/or regulations unless they are court-ordered and does the Department Operation Manual supplement reflect the current, actual local library program?</li> </ul>	Yes	
3.	<div data-bbox="159 1136 899 1178" style="background-color: #e0e0e0;"><b>General Population (GP) Access Hours:</b></div> <ul style="list-style-type: none"> <li>Are library hours of operation posted where General Population inmates can see them, and do General Population inmates have access to the library during off work hours?</li> <li>Do General Population inmates have regular access to non-legal library services?</li> </ul>	Yes	Library hours of operation are posted on Education outside bulletin boards. The Library outside bulletin boards need to be repaired. However due to insufficient staffing, these hours are often not met. There are two limited-term Library Technical Assistant positions that are scheduled to be filled shortly. It is recommended that the Limited Term positions be made permanent. It is recommended Office of Correctional Education and CVSP administration work closely to achieve this goal.

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

4.	<b>General Population Law Library Documentation:</b> <ul style="list-style-type: none"> <li>Is there documentation of General Population inmates' access to law library for a minimum of two hours within seven calendar days of their request for legal use?</li> <li>Is there a list showing inmates who request legal access, and those who received access?</li> </ul>	No	<p>The records maintained are of all the use of law library materials – copies, books borrowed, etc. - not attendance. Inmate Law Library access attendance hours are not recorded. It is recommended that the Senior Librarian develop appropriate access attendance logs and train staff in their use.</p>
5.	<b>Restricted Housing Status Inmate Access:</b> <ul style="list-style-type: none"> <li>If there are Restricted Housing inmates in the institution, is there a Department Operation Manual supplement relating to their use of the library?</li> <li>Is there a method for Restricted Housing inmates to request physical access to the law library which includes a list showing Restricted Housing inmates requests for access and inmates who actually used the library and is access granted for a minimum of one two-hour block of time if needed by the inmate, within seven calendar days of a request?</li> </ul>	No	<p>AdSeg inmates have a Law Library Electronic Delivery System (LLEDs) unit in their area per the Warden's orders. The additional required printed texts are not in the AdSeg unit. They must be requested. Technically, these AdSeg inmates do not have physical access to a complete mandated collection and are commonly paged. Inmates needing access to the law are placed in a cell with the Legal Library Electronic Data System computer. The Captain on the unit says he lacks staff to provide escort to the library and there are no law library study cells in the General Population libraries.</p>
6.	<b>Restricted Housing Status Non-Legal Library Services:</b> <p>Do Restricted Housing inmates receive general library services?</p>	Yes	<p>Books sent to AdSeg are books weeded from the General Population collection but all are complete and in readable condition.</p>

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

7.	<b>Library Expenditures:</b> <ul style="list-style-type: none"> <li>Are library funds spent for magazines/newspaper subscriptions, fiction and nonfiction books, supplies, processing, repair, and interlibrary loan fees?</li> <li>If other items are purchased, are they for library use?</li> </ul>	<b>Yes</b>	The Senior Librarian limits magazine subscriptions to no more than 12 to 15 per satellite. The selection is broad. The only newspaper subscription is to the Daily Journal –a law newspaper that is in high demand. The Senior Librarian plans to use some of the money to computerize library circulation in all of the libraries.
8.	<b>Inmate Welfare Funds (IWF) Expenditure:</b> <p>Are Inmate Welfare Funds used to purchase newspapers, magazines, and paperback fiction books, etc.?</p>	<b>No</b>	The library does not receive Inmate Welfare Funds. Inmate Welfare Funds are used to purchase TV Guides for all the housing units.
9.	<b>Law Library Expenditure:</b> <ul style="list-style-type: none"> <li>Does the Senior Librarian understand the process associated with receiving the mandated law discs/books through the warehouse or mail room?</li> <li>Are the Stock Received Reports completed and submitted to the Regional Accounting Office?</li> </ul>	<b>Yes</b>	
10.	<ul style="list-style-type: none"> <li>Are all received mandated law books and discs made available to inmates in a timely manner?</li> <li>Are the discs timely loaded on the Law Library Electronic Data System computer?</li> <li>Are the law books shelved promptly?</li> </ul>	<b>Yes</b>	The Senior Librarian receives all discs and print updates. He loads all discs and has print materials promptly shelved.
11.	<ul style="list-style-type: none"> <li>Are law library discs checked in by the Associate Information Specialist Analyst?</li> <li>If not, who checks them?</li> </ul>	<b>No</b>	The Senior Librarian checks all law library discs, not the Associate Information Specialist Analyst.
12.	Does the librarian know what steps to take if a mandated law library book or disc is not received when it should be?	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

13.	<b>Library Book Stock - Quality, Part I:</b> <ul style="list-style-type: none"> <li>• Within the entire institution's libraries, is there at least one encyclopedia with a copyright date within the last five (5) years and one unabridged dictionary (no older than 5 years);</li> <li>• Does the library program have at least three directories relevant to the questions asked by the population served?</li> </ul>	Yes	World Book Encyclopedia, 2005; Webster's Unabridged Dictionary, 2006; Directory of Courts. The internet through the librarians is available to fill other directory-type requests.
14.	<b>Library Book Stock - Quality, Part II:</b> <p>Does each library in the institution have a current world almanac, an atlas that is no more than three (3) years old, an English language dictionary that is no more than five (5) years old, and a Spanish and English dictionary that is no more than ten (10) years old?</p>	Yes	World Almanac 2008 Goode's Atlas 2005 Cassells Spanish/English- English-Spanish 2000 Webster's Unabridged Dictionary 2006
15.	<b>Library Book Stock - Quality, Part III:</b> <ul style="list-style-type: none"> <li>• Does each library regularly inspect the physical condition of their books?</li> <li>• Does the library program have a book repair procedure</li> </ul>	Yes	Books are well-used, in fair condition. All are intact and readable.
16.	<b>Library Book Stock - Quality, Educational Support, Literacy, Multi-Ethnicity:</b> <p>Does each library in the institution have at least one (1) textbook and two (2) supplemental titles which have copyright dates not more than ten (10) years old representing each vocational and academic program in the institution, a minimum of 100 titles representing high interest/low level reading books, a minimum of 250 multi-ethnic titles, including but not limited to Black American, Asian-American, Hispanic-American (inc. Spanish language) and Native American materials?</p>	No	Senior Librarian sent a letter to all Education staff requesting a copy of their textbooks for the libraries. About 25% responded. The textbooks are kept in the main library and can be requested by satellite libraries for inmate check-out. The Senior Librarian plans to send another letter out soon at get more textbook copies. The Senior Librarian needs a good source for adult-interest/low-reading level materials. The Principal Librarian will assist him in this area. An excellent, wide ranging collection of multi-ethnic titles has been developed and integrated into the main catalog.

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

17.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Library Book Stock - User Orientation:</b></div> <ul style="list-style-type: none"> <li>• Are book collections designed to meet the needs and interests of the inmate population served?</li> <li>• Does the librarian regularly meet with an inmate library advisory group, and does the library maintain a suggestion box?</li> </ul>	<b>No</b>	<p>The library does not maintain library advisory group meeting notes. However, the Senior Librarian constantly requests recommendations for book titles inmates would like to have in the library and follows through by purchasing them. The Senior Librarian talks informally with the Men's' Advisory Council advisory group but is never on their agenda. All libraries have wooden suggestion boxes prominently situated.</p>
18.	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;"><b>Library Book Stock - Quantity: (Department Operation Manual Book Aug)</b></div> <ul style="list-style-type: none"> <li>• Does the current library collection contain the number of fiction and nonfiction books mandated by California Department of Corrections and Rehabilitation?</li> <li>• Does this include any new books purchased through Recidivism Reduction Strategies (RRS) funding?</li> </ul>	<b>No</b>	<p>The Senior Librarian is currently in the process of reconfiguring all the libraries and does not have a complete inventory available. The Senior Librarian has developed a unique circulation approach for his RRS collection. All the book titles are maintained in the main library. Every satellite library has a binder with a different assortment of cover titles of the RRS books. (These are rotated regularly.) Inmates request and receive the books through their yard libraries.</p>
19.	<p>Have all books purchased through the Recidivism Reduction Strategies funds been received, shelved, and inmate use tracked?</p>	<b>Yes</b>	<p>However, no report of the use has been made to headquarters. A report should be issued.</p>

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

20.	<b>Book Access:</b> <ul style="list-style-type: none"> <li>Is there a card catalog or equivalent system that inmates can use to find a book by title, author, or subject matter?</li> <li>Can inmates request books that are not in the library collection?</li> </ul>	No	There is an excellent master catalog listing all the books by author and title. Each satellite library has a similar book collection for their libraries and the master for intra-library loaning. Subject or genre catalogs should be developed. The master catalog should be reviewed so that fiction and non-fiction are not mixed. The Senior Librarian will order requested books if they are appropriate.
21.	<b>Circulation:</b> <p>Is there an adequate library book checkout system in place and an adequate overdue system in use?</p>	Yes	It is a manual system. The Senior Librarian would like to switch to an automated system.
22.	<b>Mandated Law Library/California Code of Regulations, Department Operation Manual</b> <ul style="list-style-type: none"> <li>Are the Gilmore v. Lynch mandated law books up to date?</li> <li>Does the library collection have the most current California Code of Regulations/Title 15 in English and Spanish?</li> <li>Is there a method of displaying proposed and actual revisions of California Code of Regulations/Title 15 for the inmate population, and does each library have a complete up-to-date Department Operation Manual?</li> <li>Are all the Law Library Electronic Data System computers up-to-date and operating in each library?</li> </ul>	No	The Gilmore v. Lynch mandated law books deficiency is due to OCE delays. Some libraries are missing the Spanish issue. All Legal Library Electronic Data System computers are operational.
23.	<b>Law Library - American Disability Act (ADA):</b> <p>Are American Disability Act mandatory postings present in the library?</p>	Yes	
24.	<b>Circulating Law Library:</b> <p>Is a procedure for accessing the Circulating Law Library in place?</p>	Yes	Internet access in administration is used.

# COMPLIANCE REVIEW FINDINGS

## LIBRARY/LAW LIBRARY SECTION

25.	<b>Court Deadlines:</b>  Are court deadlines verified, and is there documentation that inmates with established court deadlines have priority access to the library?	Yes	Updated PLU list is maintained
26.	<b>Law Library Forms and Supplies:</b>  Do inmates have access to court required forms; are required legal supplies adequate and available; are procedures to distribute forms and supplies appropriate; and do all law libraries follow the same law library procedures?	Yes	
27.	<b>General Library Forms and Supplies:</b>  Are adequate supplies available to process library materials, and are there standardized forms for library procedures that are used by all the libraries in the institution?	Yes	
28.	<b>Inmate Clerk Training:</b>  <ul style="list-style-type: none"> <li>Do inmate library/law library clerks receive documented training? Are training records maintained for each inmate employee?</li> <li>Do inmate clerks receive training on a regular basis in law library and general library processes?</li> </ul>	No	No regular training is offered in law library and general library processes. The auditor recommends that a regular training program for law library and general library processes be established.
29.	<b>Security and Order:</b>  <ul style="list-style-type: none"> <li>Are personal alarms issued by institution to library staff; does library staff wear a whistle and the issued personal alarms?</li> <li>Are exits clearly marked and evacuation plans posted in accordance with the institution's emergency evacuation plan?</li> </ul>	No	Not all exits are clearly marked and not all evacuation plans are up to date.



# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Mark Lechich</b>		<b>YES/NO</b> <b>or NA</b>	<b>COMMENTS</b>
<b>Duty Statement / Job Description / Credentials</b>			
1.	Do you have a current duty statement on file (within one year)?	<b>Yes</b>	Mr. Tom Hunt is an outstanding PLATO Lab instructor.
2.	Do you have a valid credential on file?	<b>Yes</b>	Just renewed in January.
<b>Security / Order</b>			
3.	Are personal alarms issued by the institution to teaching staff, and worn?	<b>Yes</b>	Plus Mr. Hunt has a whistle.
4.	Are exits clearly marked and emergency evacuation plans posted in accordance with the institution's emergency evacuation plan?	<b>Yes</b>	Exit signs over all three doors with the evacuation plans next to doors.
<b>Supervisory / Support</b>			
5.	Do you receive support from your supervisor and other educational staff?	<b>Yes</b>	Good support from Ms. Redway.
6.	Does the Vice Principal visit/observe your class? Does the Principal visit /observe your class? Do you maintain a sign-in log?	<b>Yes</b>	Ms. Redway visits two to three times a week. Mr. Ynson visits once a month.
<b>Inmate Enrollment</b>			
7.	Do you maintain a minimum enrollment of 27 students?	<b>Yes</b>	Twenty-seven students for 6.5 hours per day.
8.	Do students receive direct/group instruction?	<b>Yes</b>	Group work on board covering all subject areas.
9.	Is the Literacy Learning Lab a "self contained" program?	<b>Yes</b>	
<b>Student Records / Testing Achievements</b>			
10.	Do you verify non-GED or HS graduation of the student?	<b>Yes</b>	Mr. Hunt checks with Ms. Pate, the Assessment Office Assistant, to verify the GED or High School Diploma.
11.	Do you start a student record file upon the student entering the Literacy Learning Lab program?	<b>Yes</b>	Mr. Hunt begins the student file immediately upon entering the Plato Lab
12.	Does each student have a current TABE score? <i>If not, do you refer the student for testing?</i>	<b>Yes</b>	TABE and CASAS scores current. If student's TABE is not current Mr. Hunt will test student.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: CVSP DATE: March 3-7, 2008 COMPLIANCE TEAM: Mark Lechich	YES/NO or NA	COMMENTS
13.	Do you assess student's basic skill level? <b>Describe</b>	Yes	Teacher interviews student and has the student orally read to determine reading level.
14.	Are at least 90% of the CDC-128E's, classroom records and accountability documents current, accurate and secured?	Yes	All student files are current, accurate, and secured in locked cabinet.
15.	Are the Student Files current (incl. TABE and any assessment scores)? <b>Review</b>	Yes	All scores are current.
16.	Is there a current Student Job Description on file?	Yes	The Federal Education Grievance Procedure forms are included.
<b>Instructional Expectations</b>			
17.	Do you use the approved CDCR Competency Based ABE curriculum?	Yes	Incorporated in group work.
18.	Use of differentiated instructional methods? <b>Describe</b>	Yes	Group and peer learning.
19.	Do students track their own progress?	Yes	Students receive assignment work weekly and they track their PLATO progress from the software.
20.	Do the students receive computer orientation? Is there continuous training? <b>Describe</b>	Yes	The teacher does the orientation and on going training, if needed, with each new student.
21.	Do you maintain course outlines and lesson plans? <b>Review files</b>	Yes	Outstanding outlines and lesson plans all contained in red binder.
22.	Do you use alternative assessment instruments (besides the required TABE), to determine a student's instructional plan? <b>Describe</b>	Yes	CASAS and PLATO software tests.
23.	Do students spend an average of six months of instructional time enrolled in the program?	Yes	Six months to a year is the average.
<b>Other Services</b>			
24.	Do you refer students to other services, i.e. medical? <b>Describe the process.</b>	Yes	Teacher would have the Education Officer contact medical.
25.	Do you provide the students career-related information?	Yes	Job related activities, goal setting and other life skills.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Mark Lechich</b>	<b>YES/NO</b> <b>or NA</b>	<b>COMMENTS</b>
26.	Do you have student aides? If so, how many and how are they used?	<b>Yes</b>	Three student aides. They provide tutoring and clerical support.
27.	Have you participated in conferences, workshops and seminars from July 1, 2007– December 31, 2008? If so, provide a list.	<b>Yes</b>	Reading Plus training in August, 2007, for new software program.
<b>Expenses</b>			
28.	Are spending levels appropriate for material purchases and training to support program needs?	<b>No</b>	Mr. Hunt is not happy with the spending levels. This problem is a hindrance to his program.
<b>Equipment</b>			
29.	Do you maintain a complete and current inventory of equipment? Is equipment tagged with a Workforce Investment Act property tag? <b>Conduct an inventory.</b>	<b>Yes</b>	This PLATO Lab has antiquated computers and they are scheduled to set-up the new server and computers within the next two weeks.
30.	Is your software appropriately maintained by PLATO's technical field staff?	<b>Yes</b>	Mr. Hunt is very happy with the PLATO software and the support from the PLATO Learning, Inc.
31.	Do you register all new software purchases with the Associate Information Systems Analyst?	<b>Yes</b>	The Supervising Information Systems Analyst is aware of all software used in Literacy Learning Lab.
<b>Committees / Meetings</b>			
32.	How often do you meet with the referral teacher for consultation on a student?	<b>N/A</b>	
<b>CASAS/TOPSPRO Management Information System (MIS) Coordinator</b>			
33.	Have you been trained in the area of California Accountability and the TOPSPRO Management Information System to appropriately perform your duties as a Comprehensive Adult Student Assessment System Coordinator? When was the date of the last training? <b>Dates of last trainings</b>	<b>Yes</b>	Mr. Rodney Hayes attended the April, 2007 and the October, 2007 TOPSPRO training conducted by the WIA Administrator. He also attended the 2007 CASAS Summer Institute.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Mark Lechich</b>	<b>YES/NO</b> <b>or NA</b>	<b>COMMENTS</b>
34.	Do you have an adequate amount of Comprehensive Adult Student Assessment System (CASAS) testing materials to implement CASAS? <b><i>Explain the CASAS testing procedures at your institution.</i></b>	<b>Yes</b>	Adequate amount of testing material. Test list sheet is given to teacher and copy of list remains with coordinator. Sign-Out/Sign In Sheet system.
35.	Are the Comprehensive Adult Student Assessment System testing materials appropriately inventoried and secured?	<b>Yes</b>	Locked in cabinet in secured Testing Office.
36.	Are you using the latest version of the TOPSpro Management Information System software?	<b>Yes</b>	TOPSpro version 4.6 Build 68.
37.	Is the hardware equipment (Scantron machine) and software (TOPSpro Management Information System) used to implement Comprehensive Adult Student Assessment System appropriately maintained?	<b>Yes</b>	Scanner is antiquated and a new scanner is on order. The computer is in good shape.
38.	Do you provide each teacher with a <b>Student Performance by Competency Report</b> to assistance them in preparing lesson plans?	<b>Yes</b>	Competency Reports for Students and Class. Student Gains by Class Report.
39.	Do you know how to generate the <b>California Payment Point Report</b> ? Can you generate a <b>Preliminary Payment Point Report</b> ?	<b>Yes</b>	After each scanning to keep tabs on student progress for teachers. Assist Coordinator with data cleaning.
40.	Are the appropriate students receiving and completing the <b>Core Performance Surveys</b> ? <b><i>Explain the process in place to ensure that students are receiving the surveys.</i></b>	<b>Yes</b>	If the ex-student is still at the institution the CASAS Coordinator locates student to complete survey and submit to the WIA Administrator.
41.	Can you generate an up to date list of students that will be receiving the <b>Core Performance Survey</b> for the past quarter?	<b>Yes</b>	Second Quarter data showed "No Student Qualified". CASAS Coordinator would locate ex student to have him fill out survey.
42.	Can you generate a <b>Data Integrity</b> site review?	<b>Yes</b>	Data Integrity Report is used for assisting Coordinator to locate errors in the data.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANT PROGRAMS SECTION

Workforce Investment Act (WIA)

	INSTITUTION: CVSP DATE: March 3-7, 2008 COMPLIANCE TEAM: Mark Lechich	YES/NO or NA	COMMENTS
43.	Can you generate a <b>Student Gains by Class Report</b> ? Can you produce five student Entry/Update records and Pre/Post Test records? (Check reports with <b>Student Gains by Class Report</b> and <b>Student Lister</b> . Dates, testing books, and scores should match between records)	Yes	This report is given to teachers and supervisors to account for the students learning gains.  All records matched.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

Incarcerated Youth Offender (IYO) Program

No.	<b>INSTITUTION: CVSP</b> <b>DATE: January 16, 2008</b> <b>COMPLIANCE TEAM: Tom Posey</b>	<b>YES/NO OR N/A</b>	<b>COMMENTS</b>
1.	Does the IYO Teacher have a copy of the current IYO Grant?	<b>Yes</b>	On Disk
2.	Is there a signed IYO Enrollment Agreement on file for each participant?	<b>Yes</b>	
3.	Is there evidence on file that each participant graduated from high school or passed the GED exam?	<b>Yes</b>	
4.	Is there a Participant Demographic/ Biographic information sheet on file and, that his/her portfolio has been started?	<b>Yes</b>	
5.	Does the IYO Teacher use CAPS, COPS AND COPEs to identify inmate job skills?	<b>Yes</b>	
6.	Are the results of CAPS, COPS AND COPEs assessment on file?	<b>Yes</b>	
7.	Does the IYO Teacher Identify inmate jobs indexed to skills?	<b>Yes</b>	
8.	Does the IYO Teacher provide job counseling and job resumes for participant?	<b>Yes</b>	
9.	Does the IYO Teacher provide academic and vocational training courses for participants?	<b>Yes</b>	
10.	Does the IYO Teacher track success of IYO participants after parole?	<b>Yes</b>	CCRC provides tracking information.
11.	Does the IYO Teacher provide services to prisons in surrounding areas?	<b>Yes</b>	Ironwood State prison.
12.	Does the IYO Teacher use the Internet, phone and fax to establish contact with Parolees?	<b>Yes</b>	Through CCRC.

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

### Incarcerated Youth Offender (IYO) Program

13	Does the IYO Teacher meet at least once on a quarterly basis with active participants in IYO?	Yes	
14	Does the IYO Teacher indicate in IYO database why inmates have declined or dropped from the IYO program?	Yes	
15	Does the IYO Teacher communicate and maintain rapport with Vocational and Academic teachers?	Yes	
16	Does the IYO Teacher prepare and submit reports to the IYO Program Coordinator via memos and the IYO database?	Yes	
17	Does the IYO Teacher attend training, IYO quarterly meetings and pertinent conferences?	Yes	
18	Does the IYO Teacher maintain a hard file for each active/inactive or former participant and participant parolee?	Yes	
19	Does the IYO Teacher's hard copy file contain assessment information, enrollment and tuition agreements, evidence of GED or high school completion, contact information and relevant chronological documentation?	Yes	
20	Does the IYO Teacher's hard file and database information are consistent and in agreement with each other?	Yes	The computer is currently down and cannot verify.
21	Does the IYO Teacher ensure that the inventory sheet is up to date; all equipment is clearly marked and identified with IYO inventory tags?	Yes	
22	Does the IYO Teacher work with contracted vendors to help with the successful transition from prison to parole?	Yes	CCRC
23	Does the IYO Teacher check to ensure transfers from other IYO institutions still meet eligibility requirements?	Yes	

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

### Incarcerated Youth Offender (IYO) Program

24	Does the IYO Teacher ensure that only the IYO Representative uses IYO equipment?	Yes	
25	Does the IYO Teacher use OBIS to update the candidate pool on a monthly basis?	Yes	
26	Does the IYO Teacher Issues trust withdrawals for any materials or equipment loaned to participants?	Yes	
27	Does the IYO Teacher maintain all information for each participant in the IYO database and is it current and up to date to include, but not limited to, the following database fields (minimum fields to be completed)?	Yes	
a	CDC #;First and Last name	Yes	
b	EPRD; Date Of Birth	Yes	
c	Date Enrolled IYO	Yes	
d	Participant Notes if applicable	Yes	
e	Program Exit Code if applicable	Yes	
f	Program Exit Date if applicable	Yes	
g	Parole Region, Unit and County if known	Yes	
h	Training programs recorded as a separate record and corresponding tuition agreement in participant's file	Yes	
i	Program Name; Entry Date; Completion Date; Early Exit Date and Reason (if applicable); notes on status of course/course completion, earned grade etc. in Training Placement record	Yes	
j	Expense Date; Amount; Training Provider; Training Program; Participant Name; CDC# and applicable notes	Yes	



# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

### Incarcerated Youth Offender (IYO) Program

k	Incarcerated and post incarcerated address noted and recorded as separate records in Location Info.	<b>Yes</b>	
l	Uses DDPS disk to update IYO database	<b>No</b>	Institution does not provide access to the DDPS. Only the OBIS is used.
m	Has internet access; uses internet as resource for employment and other transitional information for participant	<b>Yes</b>	
n	Sends and Receives changes to IYO database to HQ within 24 hours of receiving update disk from HQ.	<b>Yes</b>	

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act  
Vocational and Technical Education Act Grant

No.	<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Ron Callison</b>	<b>YES/NO OR N/A</b>	<b>COMMENTS</b>
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### Inmate Enrollment

1.	Is the class meeting the OCE required enrollment quota?  (Note is the actual enrollment in the comments section).	Yes	Four Programs Quota: <b>108</b> Enrollment for four programs: <b>108</b>
----	---	-----	---

### Equipment Inventory

2.	Is VTEA equipment properly tagged?  (Note the condition of equipment in the comments section).	Yes	Condition of equipment: From New to Fair depending on the program
3.	Is VTEA equipment used for the intended purpose?	Yes	

### Student Records / Testing Achievements

4.	Are course completions being issued for OCE program training requirements?  ■ How many students are trained per year? (Note the number of students trained per year in the comments section).	Yes	Number of students trained per year for all four programs: 220
5.	Do Student files verify equipment training on CDC 128-e?	Yes	
6.	Is the OCE approved curriculum and recording system in use?	Yes	
7.	Are lesson plans in accordance with OCE guidelines?	Yes	

### Related Training

# COMPLIANCE REVIEW FINDINGS

## FEDERAL GRANTS PROGRAMS SECTION

Carl D. Perkins Act  
Vocational and Technical Education Act Grant

No.	<b>INSTITUTION: CVSP</b> <b>DATE: March 3-7, 2008</b> <b>COMPLIANCE TEAM: Ron Callison</b>	<b>YES/NO OR N/A</b>	<b>COMMENTS</b>
8.	Is safety and literacy training taking place in accordance with OCE guidelines?	Yes	Instructors have neat tracking systems.
<b>Vocational Classroom Physical Access</b>			
9.	Are students able to get physical to the vocational shops over 50% of the time?	Yes	
<b>Trade Advisory Committee</b>			
10.	Are quarterly meetings held and minutes kept?	Yes	Number of TAC members: 41 total for all four programs.
<b>Supplemental Areas (not counted for points on the overall Compliance Review)</b>			
11.	Apprenticeship: <ul style="list-style-type: none"> <li>▪ Number of apprentices_____</li> <li>▪ Institutional Pay_____</li> <li>▪ Union/Company Affiliation_____</li> <li>_____</li> <li>▪ Current DAS Form_____</li> <li>▪ OJT Work Logged_____</li> <li>▪ Less than 5 years_____</li> </ul>	NA	
12.	Is the shop clean?  (Note the cleanliness and general maintenance of the shop in the comments section).	Yes	

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

INMATE APPEALS

CHUCKAWALLA VALLEY STATE PRISON

MARCH 3 THROUGH 7, 2008

**PRELIMINARY**



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

# Formal Review of Administrative Segregation Bed Utilization Review

## Chuckawalla Valley State Prison

**Review Team:** A.S. Altnow, CC II, Inmate Appeals Branch

### SUMMARY CHART

AREA REVIEWED APPEALS		RATING 2008	
		Score	Page No.
<b>OVERALL RATING</b>		<b>86</b>	1
A. ACCESS TO INMATE APPEALS		100	2
B. TRACKING/FILING APPEALS		100	4
C. PREPARATION OF APPEALS		76	5
D. TIMEFRAMES		85	6
E. APPEAL RESPONSES		95	7
F. SPECIALIZED PROCESSING OF APPEALS		100	8
G. TRAINING and OFFICE STAFFING		40	9
H. CURRENT OVERDUE APPEALS		99	10

## INMATE APPEALS AUDIT

The findings in this Inmate Appeals Audit resulted in an overall score of 86. All areas and their results are listed below.

Appeals Coordinator Michael Bunts, AGPA Mary Reichle, and OA Lupe Rios who are all assigned to the, Appeals Office, are experienced and knowledgeable in all facets of the appeals process. The Appeals Office AGPA Mary Reichle and, Office Assistant Lupe Rios, were very helpful, as was the Appeals Coordinator Michael Bunts. It was indeed a pleasure to work with all of the staff in the CVSP Appeals Office.

The specific sections and their corresponding questions and scores are identified below. Copies of the Inmate Appeals Worksheets are available upon request.

### A. ACCESS TO INMATE APPEALS:

Section Rating: 100%

- 1) **Do the law libraries, general population, and special housing units have the appropriate forms available on request from the inmate?** [CCR 3084.1 (c)]

12 sample # 12 # correct = 100%

Question Rating: 50

Score: 50

- 2) **Does the institution provide inmate access to the California Code of Regulations (CCR), Department Operations Manual (DOM), Section 54100, Inmate/Parolee Appeals, and CDC Form 1824s in each inmate law library?** [DOM Section 101120.11, 54100.3]

4 sample # 4 # correct = 100%

Question Rating: 10

Score: 10

*There was easy access to the forms and manuals in the law libraries.*

- 3) **Does the institution provide the orientation inmates a written summary of the inmate's right to appeal and appeal procedures?** [CCR 3002(a)(2)]

Yes

Question Rating: 20

Score:

20

- 4) Does the institution provide the orientation inmates verbal staff instruction regarding inmates' right to appeal and appeal procedures? [CCR 3002(a)(2)]

Yes

Question Rating: 20      Score: 20

.

SECTION POINT TOTAL **100**

**Recommendation: Excellent Job!**

- 5) **\*\*Does the institution provide the CDC Form 602 in both English and Spanish?**

Yes

Question Rating: 0      Score: 0

\*\* This question is for information gathering only.

**B. TRACKING AND FILING APPEALS****Section Rating: 100%**

1. Does the Inmate Appeals Office utilize the automated Inmate Appeals Tracking System (IATS) to record all appeals received at the formal levels? [DOM Section 54100.9]

**Yes**Question Rating: 15      **Score: 15**

2. A review of the appeals files indicate the appeal forms have been copied on both sides and supplemental documents are attached? [DOM Section 54100.3]

60 sample # 60 # correct = 100% Question Rating: 25      **Score: 25**

3. Does the institution implement an appeal decision (granted or granted in part) modification order within 90 days? [CCR 3084.5(i)]

20 sample # 20 # correct = 100% Question Rating: 25      **Score: 25**

4. Is there a procedure and tracking system in place for noticing Administrative Staff of overdue appeals?

[CCR 3084.6, DOM 54100.12]

**Yes**Question Rating: 35      **Score: 35**SECTION POINT TOTAL **100**



**C. PREPARATION OF APPEALS****Section Rating: 76%**

- 1) **Are inmates interviewed at the first level of review or at second level if first level is waived?** [CCR 3084.5 (f) and DOM 54100.14]

70 sample # 70 # correct = 100%

Question Rating: 25

**Score: 25**

- 2) **Do the dates on the appeal correspond with the dates on the IATS?**  
[DOM Section 54100.9]

70 sample # 5 # correct = 7%

Question Rating: 25

**Score: 4**

- 3) **A review of the appeals indicate they are complete, all dates included and signatures included (all blanks filled in appropriately on the CDC Form 602)?** [DOM Section 54100.3]

70 sample # 62 # correct = 89%

Question Rating: 25

**Score: 22**

- 4) **Is there evidence that appeal decisions are reviewed by the institution head or his/her designee?** ?[CCR 3084.5(e)(1)]

70 sample # 70 # correct = 100%

Question Rating: 25

**Score: 25****SECTION POINT TOTAL 76**

Recommendation: The appeals staff have received training on the issue that the date the appeal was returned to the inmate and the completed date in IATS must match. This was a major factor to the lower score in this area. In addition, some of the appeal responses at the first level were missing dates, signatures, and on the staff complaint appeals the rights and responsibilities statement was not always complete. Training to staff on a regular basis will resolve these issues.

**D. TIMEFRAMES****Section Rating: 85%**

- 1) **Are appeals being assigned at each level within five working days of receipt in the Appeals Office?** [DOM 54100.9]

70 sample # 68 # correct = 97%

Question Rating: 25

**Score: 24**

- 2) **Are informal appeals completed within ten working days?**  
[CCR 3084.6 (b)(1)]

40 sample # 29 # correct = 73%

Question Rating: 25

**Score: 18**

- 3) **Are first-level responses completed within 30 working days?**  
[CCR 3084.6 (b)(2)]

70 sample # 57 # correct = 81%

Question Rating: 25

**Score: 20**

- 4) **Are second-level responses completed within 20 working days, or 30 working days if first level is waived pursuant to section 3084.5(c)?** [CCR 3084.6 (b)(3)]

70 sample # 57 # correct = 91%

Question Rating: 25

**Score: 23**

SECTION POINT TOTAL **85**

**Recommendation:** The lower score in this area was due to the fact a majority of the appeals reviewed at the Informal Level were not completed within 10 days. Formal training for all staff on a continual basis will alleviate this issue. As informal appeals are not tracked and logged, the appeals office has not the ability to control this process other than through training. In addition, many of the staff complaint appeals at the First Level of review were late, lowering the overall score. Second Level appeals were excellent, near perfect.

**E. APPEAL RESPONSES****Section****Rating: 95%**

- 1) **Does the institution prepare a written response at the first level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 20 # correct = 80%

Question Rating: 25

**Score: 20**

- 2) **Does the institution prepare a written response at the first level of review stating the reasons for the specific decision being rendered?** [CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25

**Score: 25**

- 3) **Does the institution prepare a written response at the second level of review stating the appeal issue?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25

**Score: 25**

- 4) **Does the institution prepare a written response at the second level of review stating the reasons for the specific decision being rendered?**

[CCR 3084.5 (g) and DOM 54100.15]

25 sample # 25 # correct = 100%

Question Rating: 25

**Score: 25**

SECTION POINT TOTAL **95**

**Recommendation:** Some of the First Level Appeals were not as complete as they could have been. The appeal response must fully reiterate the appeal issue, all appeal issues must be addressed, and it must completely explain the reasoning for the decision rendered. One way to help this issue is direct staff to attach a memorandum format to the appeal when possible. This results in more complete appeal responses.

**F. SPECIALIZED PROCESSING OF APPEALS****Section Rating: 100%****STAFF COMPLAINTS****APPEAL RESTRICTION***STAFF COMPLAINTS*

- 1) **When a staff complaint is filed against a Peace Officer, is notice given to that Peace Officer regarding the filing of the complaint? (Unit 6 Memorandum of Understanding, Section 9.09(D), Personnel Investigations, AB 05/03, DOM 54100.25.2)**

**Yes****Question Rating: 20      Score: 20**

- 2) **Is the institution keeping Staff Complaints for a period of five years? [DOM 54100.25.5 and Penal Code 832.5(b)]**

**Yes****Question Rating: 20      Score: 20**

- 3) **Are all allegations of staff misconduct presented to the warden or designee for determination of the type of inquiry needed? [AB 05/03]**

**Yes****Question Rating: 20      Score: 20**

- 4) **Are all allegations of staff misconduct presented to the warden or designee at least weekly? [AB 05/03]**

**Yes****Question Rating: 20      Score: 20***APPEAL RESTRICTION*

- 5) **Is there evidence of authorization from the Chief of the Inmate Appeals Branch (IAB) to place an inmate on restriction? [CCR 3084.4(3), (4)]**

Yes

NONE

**Question Rating: 20      Score: 20****SECTION POINT TOTAL 100**

**G. TRAINING/OFFICE STAFFING****Section Rating:**

1. Is there evidence that the Appeals Coordinator works with the In-Service Training (IST) officer to ensure that training on the appeals procedure is carried out? [DOM 54100.3]

**Yes**Question Rating: 20      **Score: 20**

2. Is there evidence that the Inmate Appeals Process training is provided to new supervisors during Supervisor's Orientation? [DOM 32010.10.2]

**No**Question Rating: 30      **Score: 0**

There is no evidence this is being accomplished.

3. Is there an updated Inmate Appeals lesson plan, which identifies recent changes in Department policy? [DOM 32010.8.4, 54100.3]

**No**Question Rating: 30      **Score: 0**

4. If an inmate is assigned as a clerk in the unit, is he/she prevented from having access to the CDC Forms 602 at any level? [CCR Sections 3370(b) [component thereof]

**Yes**Question Rating: 20      **Score: 20****SECTION POINT TOTAL 40**

**Recommendation:** Formal IST training should be initiated for all new employees, as well as all employees during their formal yearly training, or as OJT training on a continual basis.

**H. CURRENT OVERDUE APPEALS****Section Total:**

1) What is the number of the current overdue First Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	0
31-90 days	2	.50	1
91-180	0	.75	0
181+	0	1	0

Question Rating: 50

Points deducted: 1

Score: 49

2) What is the number of the current overdue Second Level appeals and by how many days late?

[CCR 3084.6, DOM 54100.12]

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

Question Rating: 50

Points deducted: 0

Score: 50

**APPEALS OVERDUE FROM OTHER INSTITUTIONS (NOT COUNTED):**

# of Days late	Number of Appeals	Pts	Point Deduction (Per appeal)
0-30 days	0	.25	0
31-90 days	0	.50	0
91-180	0	.75	0
181+	0	1	0

# of Appeals: 0

Points Deducted: 0

Score: N/A

\*There were no overdue appeals from other institutions.

SECTION POINT TOTAL **99**

**ADDITIONAL AREAS OF REVIEW:** This portion has been added to the audit format; however, these areas of the institution are reviewed for information gathering and scores will not be obtained.

**1. Law Library access for ASU/SHU inmates:**

- a) What is the process for allowing ASU/SHU inmates access to the law library? [CCR 3122, 3160, 3164, 3343(k)] **Institution was in full compliance.**
- b) How often do these inmates have access to the law library? **Institution was in compliance.**
- c) How does access to the law library differ between General Library User (GLU) and Priority Library User (PLU) inmates? **Library staff were unavailable, and we were unable to review this question.**

**2. Medical Appeals Process:**

- a) What is the process for answering medical and ADA appeals?
  - i) Who responds? **Director of nurses, Medical Appeals Analyst**
  - ii) Who interviews the inmate? **Medical Appeals Analyst, Nurses**
  - iii) Who prepares the response? **Director of nurses, Medical Appeal Analyst**
- b) Talk to the CMO/HCM regarding medical appeals process. **The CMO was unavailable for interview.**

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

ADMINISTRATIVE SEGREGATION  
BED  
UTILIZATION REVIEW

CHUCKAWALLA VALLEY STATE PRISON

FEBRUARY 25 – 29, 2008

**PRELIMINARY**



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH



# CHUCKAWALLA VALLEY STATE PRISON

February 25, 2008

## ADMINISTRATIVE SEGREGATION BED UTILIZATION REVIEW

The **Chuckawalla State Prison** (CVSP) Administrative Segregation Unit (ASU) Bed Utilization Review was conducted during the week of **February 25, 2008** by **L. Luu, Classification Staff Representative, Classification Services Unit**.

The purpose of this review is to provide an assessment of bed utilization in the ASU. This assessment is intended to be used as a management tool by the institution to assist in identifying areas that could reduce time spent in ASU and overcrowding in ASU.

Attached to this report are case listing spreadsheets that identify the types of cases reviewed, by CDC numbers, and applicable data related to these cases.

### SAMPLE IDENTIFICATION

As of the date of this review, February 25, 2008, the CVSP ASU population is 136. This population includes 40 inmates received from ISP for temporary housing. This ASU Bed Utilization review focuses only on CVSP inmates that have been in ASU for 90 days or more.

A total of **20** cases were reviewed. Of these cases:

- **14** were placed in Administrative Segregation based on a pending disciplinary charge.
- **2** were placed in Administrative Segregation based on a pending investigation of safety concerns/needs.
- **4** were placed in Administrative Segregation based on a pending investigation of Prison Gang Status or update of previous validation.

Note: There was one (1) case in which the inmate was subjected to multiple disciplinary actions and an investigation into prison gang activities (T-71200). Due to its complexities, the assessment of processing time of this case is being reported separately in the Disciplinary and Prison Gang Validation case listing spreadsheets in order to provide a clearer account of how it was processed.

**Does the institution use a comprehensive ASU tracking method that records the reason for ASU placement, track time periods for specific processes and total amount of time in ASU? Yes/No**

Yes. The institution has an ASU Tracking Log that contains a variety of data fields. However, this Log does not capture all aspects of ASU cases, lacking, specifically, data fields to help track CSR expiration dates and the progress of cases pending RVRs or pending investigations of safety concerns and/or prison gang activities.

***Comment:** Although there is not a requirement that a system other than the Distributed Data Processing System (DDPS) be maintained, the DDPS capabilities are limited. A comprehensive ASU tracking system can identify a multitude of data fields, which can be customized by the needs of each specific institution. The tracking system can be very basic but still provide meaningful information that can significantly reduce workload. The system should be maintained in a format that can be sorted by specific areas to enable staff to easily identify possible problem areas at a quick glance.*

## **GENERAL ASU CASE PROCESSING TIMES**

### **Period from Initial Placement in ASU to CSR Review**

California Code of Regulations (CCR) 3335(c)(1) requires that the Institution Classification Committee refers the case for Classification Staff Representative (CSR) review and approval when any case is retained in ASU for more than 30 days. When the initial ICC review determines that a case is not expected to be resolved within 30 days, referring the case to the CSR at the time of the initial hearing expedites this process and assures compliance with the regulation.

#### ASU Placement to Initial ICC review:

Time from the date of placement in Administrative Segregation to the initial ICC referral for CSR Review ranged from **3** days to **10** days. The average time is **9** days.

*[California Code of Regulations 3335(c) requires that inmates placed in ASU be seen by ICC within 10 days of placement.]*

#### Initial ICC Review to CSR Review:

The average time from the initial ICC referral for CSR Review to the actual CSR review ranged from **11** days to **76** days. The average time is **21** days.

*[It is the expectation that cases referred for ASU retention be presented to the CSR for review within 30 days of the Classification committee referral.]*

ASU Retention Beyond Approved Retention Date:

When an ASU case is reviewed by a Classification Staff Representative (CSR), the CSR will indicate a time period in which the case must be presented again to a CSR for further review. Of the cases reviewed, there are **0** cases currently retained in ASU beyond the CSR approved retention date.

*[The expectation is there should be 0 cases in this category]*

ASU Retention Without ASU Extension Approval:

There are **0** cases that have been in ASU over 30 days that do not have ASU extension approvals at all.

*[The expectation is there should be 0 cases in this category]*

## **DISCIPLINARY CASES**

### **Hearing Timelines**

*Once a Rules Violation Report (RVR) has been issued, simply determining the time between the issuance and the subsequent hearing does not provide an accurate measurement of the institution's efficiency in processing the case. This is due to the fact that the inmate may choose to postpone the hearing until after any District Attorney review/prosecution has occurred. Due to this factor, RVR processing must be categorized and examined separately.*

Note: Of the 14 disciplinary cases reviewed, 3 received multiple SHUable RVRs. The processing time of these RVRs are being reported separately in the attached spreadsheet in order to provide an accurate account of how each RVR was processed.

RVRs heard without postponement

**10** cases were examined.

Time from the date of the issuance of the RVR to the date the RVR was heard ranged from **13** days to **110** days. The average time is **33** days.

RVRs heard with postponement pending DA action

**2** cases were examined.

Time from the date of the completion of the DA action delaying the hearing to the date the RVR was heard ranged from **22** days to **26** days. The average time is **24** days.

*(The above assessment reflects the time **from completion of DA action to RVR hearing**. The attached spreadsheets, however, contain data that reflect the time **from the issuance of RVR to RVR hearing**.)*

## **Post-Hearing Processing Timelines**

*Following the completion of the hearing by the disciplinary hearing officer or committee, there are no due process timeframes to interfere with rapid completion of the remainder of the disciplinary process. The time is measured from the hearing date through the ICC review. There are several reviews that must occur during this period. Each review is measured.*

**0** RVRs were dismissed and **6** RVRs are still pending.

### Hearing to Facility Captain Review:

Time from the date of the RVR hearing to the date the RVR was audited by the Facility Captain ranged from **1** day to **22** days. The average time is **7** days.

[The Department has no regulatory time constraint; however, the expectation is this time will be within 5 working days.]

### Facility Captain to Chief Disciplinary Officer Review:

Time from the date the RVR was audited by the Facility Captain to the date the RVR was audited by the Chief Disciplinary Officer ranged from **1** day to **15** days. The average time is **4** days.

*[The Department has no regulatory time constraints; however, the expectation is this time will be within 3 working days.]*

### Chief Disciplinary Officer to ICC review:

Time from date the CDO audited the RVR to the case being reviewed by the ICC for the RVR ranged from **10** days to **72** days. The average time is **25.5** days.

[The expectation is the inmate will appear before ICC within 14 days. This will allow staff a two-week ICC rotation period.]

### Parole Violator Cases referred to the Board of Prison Hearing (BPH) for review:

There was only one (1) case that required referral to BPH for revocation extension hearing. The processing time of this case is as follows:

- Time from the date of the RVR to the date the RVR was received by the BPH Desk was **6** days.
- Time from receipt of the RVR by the BPH desk to referral to the BPH for offer or screening was **3** days.
- Time from the referral to BPH to the date of the screening offer or hearing was **33** days.

### **Incident Report Processing**

*Once an incident has occurred, the Incident Report must be prepared and completed. This timeline measures the process within the institution as it completes the report, forwards it to its Investigative Services Unit (ISU) and the subsequent response time from the office of the District Attorney (DA) or the ISU screen-out based on local agreement with the DA.*

#### Incident Date to ISU Receipt of Incident Report:

Date from incident occurrence to the date ISU received the Incident Report ranged from **0** days to **27** days. The average time is **12** days.

*[The expectation is the complete package will be presented to ISU within 7 calendar days.]*

#### ISU Receipt of Incident Report to Referral to DA/ISU Screenout:

Date from ISU receipt of Incident Report to referral to DA or ISU screen out ranged from **6** days to **36** days. The average time is **19** days.

*[The expectation is the time should not exceed 5 working days.]*

#### DA Referral to Resolution:

Date from DA referral to either rejection or acceptance of the case ranged from **14** days to **139** days. The average time is **50.5** days.

*[This is one area that the institution has no definitive control over, however, it is suggested that the institution work closely with the DA's office to track the decision making process to resolution of either acceptance of the case for prosecution or rejection of the case for prosecution.]*

## **SAFETY CONCERNS**

*When an inmate is placed into ASU based on safety concerns, which must be investigated, there are no due process time constraints that delay the resolution and completion of the investigation. The amount of time taken to complete this type of investigation varies and generally reflects the amount of resources utilized to conduct the investigation.*

There were only **2** cases reviewed that were placed in Administrative Segregation based on the need for investigation of safety concerns.

### Investigation Initiation to Completion:

Time from the date of referral to staff for investigation to the date the investigation was concluded ranged from **3** days to **5** days. The average time is **4** days.

*[The expectation is this time should not exceed 30 calendar days.]*

### Investigation Completion to ICC Review:

Time from conclusion of the investigation to ICC review of investigation results ranged from **3** day to **7**) days. The average time is **5** days.

*[The expectation is that the inmate will appear before ICC within 14 calendar days. This will allow staff a 2-week rotation period.]*

## **GANG INVESTIGATION/VALIDATION/DEBRIEFING**

*When an inmate is placed into ASU based on the need for investigation of gang activity, there are no due process time constraints, which delay the resolution and completion of the investigation. This timeline measures the amount of time taken to complete this type of investigation, the review by the Law Enforcement Liaison Unit (LEIU) and the time to review and conclude the issue by ICC and CSR.*

There were **4** cases reviewed that were placed in Administrative Segregation based on Gang Investigation/Validation/Debriefing.

### ASU Placement to Referral to IGI for Investigation:

(This Reviewer is unable to assess the processing time in this area, as the investigations into prison gang activities in all 4 cases reviewed were initiated long before ASU placement.

### Initiation of IGI investigation to Conclusion of Investigation:

Days from IGI investigation assignment to receipt of completed investigation ranged from **157** days to **418** days. The average time is **239** days.

## **NUMBER OF INMATES IN ASU ENDORSED & AWAITING TRANSFER**

Documentation presented by Records staff indicates that there are **13** ASU cases currently endorsed and awaiting transfer. **11** of these cases have been endorsed for transfer for **1** to **17** days. The remaining **2** cases, which were endorsed for PBSP-SHU, have been awaiting transfer for **98** to **212** days as of the date of this review.

## **GENERAL OBSERVATIONS**

First of all, this Reviewer would like to thank all CVSP staff for their assistance during this review. Special thanks are given to the C&PR, the Assistant C&PR, and Records staff in ensuring that the needed files were located and readily available for the review. This review could not have been completed in a timely manner without their cooperation and commitment to assist this Reviewer in any which way possible.

As noted previously, attached to this report are case listing spreadsheets that contain data related to all the cases reviewed. These data were presented in separate case groups (i.e. Disciplinary, Safety Concerns Investigation, Prison Gang Investigation) in an effort to clearly identify areas of concern that may require reevaluation of the processes currently in place. It does not, however, provide any specific directions and/or recommendations to change the current processes.

Overall, it appears that CVSP staff have consistently scheduled inmates for classification reviews as required. Particularly in the area of initial ASU retention reviews, all inmates have been seen by ICC within 10 days of their placements into ASU. In addition, there is a clear indication that all the cases housed in ASU for 90 days or more were presented to CSR for ASU extension approvals as required.

However, additional efforts should be made to ensure timely re-presentation of cases to CSR. There are several cases reviewed that required to be returned to CSR for further action(s) were not returned to CSR before the expiration of a specifically given return date.

Please examine all data provided in this report and take necessary steps to ensure all areas of concern are addressed in accordance with applicable departmental policy and procedures.

DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screenshot or Referral	Days from referral to DA Accept/Reject/Pending	Accepted/Rejected	Total Days since Initial ASU Placement	Comments
T71200(1)	4	28	3/6/08	0	1/23/06	Drug Distribution	No	110	9	3	28	N/A	N/A	N/A	0	6	42	Accept	813	(1) While in ASU, Inmate received 3 additional RVRs for SHUable offenses. See the next 3 entries for information on the processing time on these RVRs. (2) In addition, while in ASU, the inmate was being investigated for prison gang activities. See separate Worksheet for assessment of the processing time for Gang Investigation/Validation. (3) ISU received the Incident package prior to the issuance of the RVR for Drug Distribution.
T71200(2)	N/A	N/A	N/A	N/A	4/25/06	Battery on Inmate	No	22	2	3	24	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of RVR processing time only.
T71200(3)	N/A	N/A	N/A	N/A	5/25/06	Battery on Inmate	No	28	4	15	16	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of RVR processing time only.
T71200(4)	N/A	N/A	N/A	N/A	12/4/06	Battery on Inmate with Weapon	Yes	295	6	3	21	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of RVR processing time only. (2) This case was referred and accepted by the DA for prosecution. On 8/30/07, the inmate pled guilty as charged.
P67504	9	33	3/7/08	0	8/14/07	Possession of Weapon	No	22	12	1	72	N/A	N/A	N/A	21	15	N/A	Pending	195	
H44518	8	13	3/7/08	0	8/8/07	Battery on Staff	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	27	23	N/A	Pending	201	
P55416	9	20	6/7/08	0	10/9/07	Battery on Inmate	No	36	22	1	27	N/A	N/A	N/A	N/A	N/A	N/A	N/A	139	No DA referral
H04321	8	13	5/16/08	0	3/28/07	Battery on Inmate	No	27	8	5	17	N/A	N/A	N/A	15	7	N/A	N/A	334	DA referral screened-out
V02942	10	20	2/29/08	0	7/30/07	Drug Distribution	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	11	25	N/A	Pending	280	
J53744	4	12	3/19/08	0	8/8/07	Drug Distribution	No	33	12	6	13	6	3	33	27	15	139	Accept	225	
D28348	8	13	5/8/08	0	10/5/07	Drug Distribution	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	0	36	50	Accept	201	ISU received the Incident package prior to the issuance of the RVR.



DISCIPLINARY

CDC #	Days From 114D to Initial CSR Referral	Days From Initial ICC Referral To CSR Review	Expiration Date Of Current CSR ASU Extension	If ASU Extension Has Expired, By how Many Days?	Date of RVR	Charge	Postponed Pending DA	Days From RVR to Hearing	Days from Hearing to Captains Review	Days from Captain's Review to CDO Review	Days from CDO Review to ICC Review	Days from RVR to BPT Desk	Days from BPT Desk To BPT for Offer	Days to BPT Offer or Hearing	Days from Incident to ISU Receiving 837	ISU Receipt to DA Screnout or Referral	Days from referral to DA Accept/ Reject/ Pending	Accepted/ Rejected	Total Days since Initial ASU Placment	Comments
T46548(1)	9	76	N/A	0	10/23/07	Battery on Inmate	No	14	2	5	30	N/A	N/A	N/A	N/A	N/A	N/A	N/A	125	(1) Initial ASU review was completed on 11/1/07; however, this case was not referred to CSR based on this ICC review. The inmate was seen again by ICC on 12/13/07, and this ICC action resulted in the CSR referral on 1/16/08. (2) RVR was reissued/reheard. See next entry for the processing time on the reissued/reheard RVR. (3) No DA referral.
T46548(2)	N/A	N/A	N/A	N/A	1/16/08	Battery on Inmate	No	13	1	5	10	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Assessment of RVR processing time only.
V99058	4	28	5/22/08	0	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	92	The inmate has not been charged, noting the investigation into drug distribution is still pending DOJ lab results. This entry is for assessment of the CDC 114-D process only.
K39666	9	14	3/26/08	0	10/22/07	Drug Distribution	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	16	22	14	Accept	160	
K32975(1)	4	14	2/29/08	0	8/7/07	Drug Distribution	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	14	31	35	Accept	281	While in ASU, the inmate received a RVR dated 12/9/07 for Battery on Inmate with Weapon; which has been adjudicated. However, there is no evidence that staff have issued a CDC 114-D or case referred to ICC to address this matter. See next entry for the processing time on this RVR.
K32975(2)	N/A	N/A	N/A	N/A	12/19/07	Battery on Inmate with Weapon	No	35	2	3	28	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	(1) Assessment of RVR processing time only. (2)This RVR has not been reviewed by ICC. The date of this ASU Bed Utilization Assessment is used to calculate the processing time to date.
F66386	3	14	3/19/08	0	11/17/07	Possession of Weapon	Yes	Pending	N/A	N/A	N/A	N/A	N/A	N/A	4	15	N/A	N/A	100	(1) DA referral screened-out. (2) Inmate rescinded his previous request for postponement on 11/20/07; however, it appears the RVR has not been heard as of the date of this review.

## DISCIPLINARY

[illegible]

## SAFETY

[illegible]

## GANG

[illegible]

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

RADIO  
COMMUNICATIONS

CHUCKAWALLA VALLEY STATE PRISON

MARCH 3 THROUGH 7, 2008

**PRELIMINARY**



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

## **Review of Radio Communications**

### **CHUCKAWALA VALLEY STATE PRISON**

#### **Introduction**

This review of Radio Communication Operations at the Chuckawala Valley State Prison (CVSP) was conducted by the Compliance/Peer Review Branch (CPRB), Office of Reviews and Compliance and the Radio Communications Unit (RCU), between the dates of March 3rd through March 7th, 2008. The review team utilized the California Penal Code (PC), California Code of Regulations (CCR), Title 15, California Department of Corrections and Rehabilitation (CDCR) Department Operations Manual (DOM), State Administrative Manual (SAM) and Administrative Bulletin (AB) 90/35 as the primary sources of operational standards.

This review was conducted by Ken Chappelle and Shelly Hutchens, both are assigned to Facilities Planning and Management, Telecommunications Section, RCU.

The review consisted of an on-site inspection, interviews with staff, reviews of procedures, and observation of institutional operations.

The purpose of the CPRB review is one of overall analysis and evaluation of the Institution's compliance with the terms and conditions of State regulations as applied to Public Safety Communications. Each area was reviewed with staff and any problems were reviewed or solved with the CVSP Radio Liaison. Overall, findings presented in the attached report represent the consensus.

## **Review of Radio Communications**

### **Chuckawala Valley State Prison**

#### **REVIEW SCOPE AND METHODOLOGY**

The CPRB and the RCU conducted an on-site review at CVSP during the period of March 3rd through March 7th, 2008. The purpose of this review was to assess the level of compliance with established State regulations in the areas of Public Safety Communications. This review and the attached findings represent the formal review of CVSP compliance by CPRB.

The scope and methodology of this review was based upon written review procedures developed by the CPRB and provided to CVSP staff in advance of the review.

Random sampling techniques were employed as an intrinsic part of the review process. For the purposes of this review, Complex Control and the Radio Vault were inspected. Throughout the tour, on-duty custody staff were interviewed regarding current practices.

A random sample of radios were reviewed, checking the Radio as to the Post Assignment, the Department of General Services (DGS) 'S' number and the radio serial number. Utilizing the inventory, matrix and AB 90/35 to prove the proper radio location, CVSP was at 100% on radio placement. The System Watch and Selective Inhibit Dynamic Regrouping (SIDR) computers were evaluated in Complex Control. These computers were in good working order. The Radio Vault was inspected and found to be in near perfect condition with the exception of an intrusion alarm. CVSP staff immediately completed a work order for the repair of such system.

Recommendations are to continue normal practices as CVSP has no issues with usage of the 800 MHz Trunked Radio System and all CVSP staff is following all required Public Safety Standards.

The Reviewer would also like to complement the Radio Liaison at CVSP, Officer Lee Ackerman, as his organizational skills and overall help made this review a success.

# Radio Communication Compliance Review

## Chuckawalla Valley State Prison

### Exit Conference Discussion Notes

#### March 3rd-7th, 2008

The Office of Audits and Compliance (OAC) and the Radio Communication Unit (RCU) conducted a Radio Communications Security Compliance Review of Chuckawalla Valley State Prison (CVSP) the week of March 3rd, 2008. The review covered 28 different areas which CVSP was fully compliant in 25 areas, partially compliant in 1 area and Non Compliant in 3 areas. The chart below details these outcomes. Other observations are noted below.

#### FINDINGS SUMMARY:

		Compliant	Partial Compliance	Non Compliant
1	Radio Liaison Identified?	C		
2	Inventory System in Place?	C		
3	All Radios Accounted for?	C		
4	Radio Matrix in place?	C		
5	Repair Procedure?	C		
6	Repair Tracking?	C		
7	Battery Management in Place?	C		
8	Proper usage of Battery Management?	C		
9	Inmate Access to Radios?	C		
10	Radio Vault Secured?	C		
11	Intrusion Alarm on Radio Vault?			N *
12	Authorization to Enter Vault?	C		
13	Key to Vault Secured?	C		
14	Vault key Access for DGS-TD Tech?	C		
15	System Watch/SIDR Operational & Computer Secured?	C		
16	Procedure to Operate System Watch/SIDR?	C		
17	Staff to Operate System Watch/SIDR identified?	C		
18	System Watch/SIDR Training?	C		
19	Chit System in Place for Radios?	C		
20	Other Radios on Grounds?			N**
21	Scanners on Grounds?	C		
22	Who do you contact for System Malfunction?	C		
23	Steps taken when System Fails?	C		
24	Staff have Knowledge on Radio Fail-Soft?	C		
25	Staff have Knowledge of RCU Staff?	C		
26	Off Grounds Communication / Fire Department.	C		
27	Working CLERS System?			N***
28	Working CMARS System?		P	
Total		24	1	3

**N\*** The Radio Vault Intrusion alarm was not operational but a work order was completed by Officer Ackerman.

**N\*\*** There is unauthorized radios being used by the construction crew on grounds, these radios can not be inhibited by CDCR if they were lost, misplaced or stolen by inmates.

**N\*\*\*** The CLERS remote in the EOC was non existent, DGS-Technician was contacted.

**P-** The CMARS remote in the EOC was non existent, however working in the handheld radios throughout the facility, the DGS-Technician was contacted.

Note: CVSP Radio Liaison (Officer Ackerman) was of great assistance for this review.



# Radio Communication Compliance Review

## Chuckawalla Valley State Prison

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16	Procedure to Operate System Watch/SIDR?	C		
17	Staff to Operate System Watch/SIDR identified?	C		
18	System Watch/SIDR Training?	C		
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CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
OFFICE OF AUDITS AND COMPLIANCE

PROGRAM COMPLIANCE REVIEW

REPORT OF FINDINGS

CASE  
RECORDS

CALIFORNIA STATE PRISON, LANCASTER

MARCH 10 THROUGH 21, 2008

**PRELIMINARY**



CONDUCTED BY

COMPLIANCE/PEER REVIEW BRANCH

## **CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW**

Correctional Case Records Services lead a three member team comprised of Kathy Moore, Correctional Case Records Administrator, Pam Webster, Correctional Case Records Manager, Pleasant Valley State Prison, Debbie Whelchel, Correctional Case Records Manager, Substance Abuse Treatment Facility to conduct a compliance review March 3 - 7, 2008 of specific areas within the Chuckawalla Valley State Prison records office.

Administrative staff and the Correctional Case Records Manager were aware of this review in advance and all staff was cooperative and assisted with providing information to the review team when requested.

The two primary areas reviewed were:

1. Holds, Warrants and Detainers (HWD)
2. Warden's Checkout Order (CDC 161)

An overview of the findings in the review process is outlined in this document.

### **HOLDS, WARRANTS AND DETAINERS (HWD)**

*Reference: DOM Section 72040.5.1 & 72040.5.3*

*"The HWD Coordinator shall prepare letters of inquiry or initiate teletype requests to resolve potential holds based on the CDC Form 850s completed by institution staff and complete necessary follow-ups on any communication received from law enforcement agencies. The CDC Form 850 shall be attached to the top of the detainer section of the Central File and all such actions shall be entered in the HWD log."*

*"The HWD Coordinator's initial request to obtain information shall be completed within two working days and follow-up at the 60-day and 10-day audits prior to release. Telephonic follow-up should be used at the 10-day audit."*

*"If a detainer exists or is believed to exist on an inmate, the HWD coordinator shall prepare a CDC Form 850 documenting the pertinent facts,...and immediately contacting the designated staff person responsible for evaluating the potential detainer..."*

Desk Procedures for the HWD clerical staff were reviewed. Clerical staff were interviewed and state they refer to their desk procedures frequently. They explained verbally the processes they are familiar with and when necessary they review procedures for those processes they are still learning.

## CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW

Time frames for placing active holds, warrants and detainers appear to be in compliance, however, the CDC 850's are not reflecting the time the hold, warrant or detainer was entered into OBIS.

Staff are entering holds into ARDTS and the warrants reviewed were all appropriately entered.

During the Parole Audit the CII rap sheets are being reviewed.

Of the 52 Central Files reviewed, one case was found not in compliance with DOM Section 72040.5.1, where the letter of inquiry was not forwarded to the law enforcement agency within the 2 working days of receipt of the CDC 850.

**F85681 Ingram** – Intake Audit was completed 12-13-07, and a CDC 850 was generated by the CRA at that time, however the letter of inquiry was not mailed until 1-10-08.

*Reference: DOM Section 72040.6.1 & 72040.6.2 & CR 95/01 & CR 02/06*

*"If the detainer is from a California agency for untried charges, the inmate may request disposition of pending charges by filing a CDC Form 643, Demand for Trial in accordance with the provisions of PC 1381.*

*"Case records staff shall mail the CDC Form 643 to the DA by certified mail, return receipt requested".*

*"PC 1381 stipulates a person must be brought to trial within 90 days after written notification of the place of confinement. The 90-day period starts the day the DA acknowledges receipt of the CDC Form 643".*

*"If the inmate is not brought to trial at the conclusion of the 90-day period, case records staff shall prepare:*

*A CDC Form 668, Affidavit in Support of Motion to Dismiss Pending Charges.*

*A CDC Form 669, Motion to Dismiss Criminal Charges Pending.*

*A CDC Form 670, Order of Dismissal.*

*A CDC Form 1006, Cover Memo - Motion to Dismiss.*

*All of these forms shall be forwarded to the court having jurisdiction of the Matter"*

In a review of 52 files there were three cases, **T18669 Tieabout**, **F13712Gerold**, **F77733 Lopez**, that had detainers where the CDC Form 661 was forwarded to the inmate and did not mark the box which gave the inmate the option to file a CDC Form 643, Requesting Disposition of Untried Charges in accordance with Penal Code (PC) Section 1381.

## CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW

*Reference: DOM Section 74020.6.2*

*“When a detainer for untried charges is lodged by an agency of the federal government or an agency of a member state of the interstate agreement on detainers (IAD), the interstate form provided shall be used to notify the inmate of the detainer and to request disposition of the pending charges”.*

*“PC 1389 provides for the surrender of temporary custody of a prisoner to the jurisdiction of the federal government or another state which is signatory to the IAD where they are wanted for prosecution, except Louisiana and Mississippi”.*

*“If the inmate demands trial and waives extradition by executing Form II, a court arraignment is not required and case records staff shall proceed on the basis of the inmate's demand for trial pursuant to PC 1389, Article III”.*

In a review of 52 files, 2 cases had Out of State Charges pending. In one of the cases the CDC Form 661 did not give the option to request disposition of untried charges in accordance with PC Section 1389. Extradition Proceedings had not been initiated in this case.

It was revealed during interviews conducted with the OSSI and the HWD clerical staff that the procedures for Extradition Proceedings are not being followed.

Additionally, staff indicated that their local jurisdiction, Riverside County, handles the extradition processing after they parole to their custody.

It should be noted that the PC 1389 Process is in the current Desk Procedure.

*Reference: DOM Section 72040.9*

*“When the records office receives notification that a detainer previously placed on an inmate has been dropped or expired, the HWD computerized history for that detainer shall be deleted”.*

In reviewing the desk procedures and interviewing staff regarding the Time Server Log, it was revealed they no longer maintained a Time Server Log. This procedure had been eliminated from their processes, however they were able to produce the Log that had been used in the past and indicated they would re-initiate this procedure.

### **Recommendations:**

- Staff responsible for documenting warrant information on the CDC 850 should also include the time as well as the date into the HWD Actions By Case Records Staff for the OBIS (KCHD) Update entry. This would ensure compliance with the requirement that Holds, Warrants and

## **CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW**

Detainers information is being entered into OBIS within the 4 hours per policy and procedure.

- On the job training should be provided and documented for the HWD staff, Case Records Analyst and other staff as deemed appropriate.
- Additional training should be provided in the Extradition Processing Procedure, review online Extradition Manual and Instructional Memorandums.
- On the job training should be provided on the proper documentation of information provided to the inmate via CDC Form 661.
- Re-instate the use of the Time Server Log.

### **WARDEN'S CHECKOUT ORDER (CDC 161)**

*Reference: DOM Section 74070.3*

*"...Paperwork and routine dress-out procedures on cases with release date on weekends or holidays shall be completed prior to the weekend or holiday."*

*"Prior to release of the inmate, records office staff shall prepare the CDC Form 161, Warden's Checkout Order, and arrange distribution as required by institution operations."*

*Reference: DOM Section 74070.21*

*"The following data shall be typed on the CDC Form 161:*

- *Date of Release*
- *Type of Release*
- *CDC number*
- *Commitment name*
- *Controlling Discharge Date*
- *Name of parole unit and county of residence*
- *Parole Region*
- *Check off section to indicate that PC Sections 3058.6 and 3058.8 notifications have been sent.*

*"The CDC Form 161 shall be typed by clerical staff. As part of the prerelease audit, the release of information on the form shall be verified at a level not less than that of a Case Records Analyst as the form is used by the institution as the source document for OBIS input and therefore, its accuracy determines the accuracy of parole information in OBIS"*

*Reference: Instructional Memorandum (CR 01/14)*

*"...The CDC Form 161, Warden's Check-out Order, shall indicate that a notice was sent pursuant to the applicable notification requirement..."*

## **CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW**

*“...the Warden’s Checkout Order must include a notation above the Case Records staff’s signature block which states PC 3058.6 and/or PC 3058.8 has been complied with or that PC 3058.6 and/or PC 3058.8 is not applicable.”*

Central files were reviewed for inmates/parolees who were released from Chuckawalla Valley State Prison during the preceding week of the review.

There were 45 cases reviewed and the overall findings are as follows:

The Warden’s Checkout Orders are to include a check in the boxes for the notices pursuant to PC 3058.6, PC 3058.8, etc., or N/A if not applicable. This procedure is not being followed. Of the 45 cases reviewed none reflected N/A when not applicable.

Release dates are tracked utilizing the ARDTS.

There were three cases that the Parole Unit and the County were incorrect on the CDC 161 and in OBIS, **T29963 Walls, F30106 Veal, F53606 Molina.**

There was a minor problem identified where staff is not utilizing the most current information supplied from Central Office OBIS to identify the most current Parole Unit and the County covered by each unit.

When brought to the attention of the Parole Desk and the OBIS operator it was discovered that they did not get the latest update of the Parole Units and County. Additionally, listings used by each parole desk are not consistent,

### **Recommendations:**

- On the job training should be provided and documented for the Correctional Case Records Analyst, clerical staff and Program Technicians to ensure designated OBIS entries are recorded accurately on the CDC-161 Warden’s Checkout Order and in the OBIS movement entries.
- Ensure all affected staff are provided with updated material from OBIS as soon as received.
- Ensure desk procedures and materials are current and consistent.

### **GENERAL FINDINGS**

In the Holds, Warrants and Detainer portion of the audit, 19 components were reviewed. There were three areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- Time frames between initiating the CDC 850 and forwarding the inquiry to the appropriate law enforcement agency.

## **CHUCKAWALLA VALLEY STATE PRISON COMPLIANCE REVIEW**

- Completing the CDC 661 with the appropriate option to the inmate, including but not limited to, PC 1381, PC 1389 and PC 1203.02(a).
- Follow guidelines as outlined in the current desk procedures for the Extradition process.

In the CDC Form 161 Warden's Checkout Order portion of the audit, 3 components were reviewed. There are two areas listed below that need to be brought into compliance with the current policies and procedures as indicated in the above review portion of this report:

- The Notices Sent Pursuant to PC 3058.6, PC 3058.8, etc., on the CDC Form 161 Warden's Checkout Order need to include N/A, not applicable for those that do not apply.
- Staff are not using the most current information supplied by OBIS Central Office.

### **STAFF VACANCIES**

The vacancies are reported as follows:

Two Office Technicians

Two Office Assistants (Typing)

Two Correctional Case Records Analyst (for the Tate Re-Calculations)

### **EXTENDED SICK LEAVE**

One Office Services Supervisor I – Maternity Leave

One Office Assistant – Workmen's Comp.



## **Finding 1**

- DWNYCF is required to update their Operations Manual, Section 7150, as it relates to PC 290, sex offender registration requirements.
- The parole agent III should update the process for PC 290 registrants for the legal secretary.
- Provide standardized training on PC 290 registration requirements to youth correctional counselors, parole agents, casework specialists, treatment team supervisors, and supervising casework specialists.
- The parole agent III should develop written procedures for the casework specialists and parole agents regarding PC 290 registration requirements.
- The casework section supervisor should develop a tracking system to monitor PC 290 registration forms that are in process or completed.
- The parole agents should develop a tracking system, including time cuts on the ward's projected board date, to ensure PC 290 registration forms are completed 45-days prior to finalizing the ward's parole consideration report.
- The casework services supervisor should develop a tracking system providing evidence that copies of all PC 290 registration forms are mailed to Intake and Court Services.
- DWNYCF staff should review the field files of all sex offender registrants to ensure compliance with PC 290 registration forms according to the I&C Manual, Section 4295.
- SYCRCC should update their Casework Services Procedure Manual to include a procedure on completing the Pre-Registration form (DOJ BII-5), if there is not a copy in the field file. (This section will apply to wards transferring into the SYCRCC from another facility).
- The parole agent III should ensure all staff members are following the SYCRCC Casework Services Procedure Manual as it pertains to handling the Change of Address form.
- SYCRCC should update the SYCRCC Casework Services Procedure Manual according to the I&C Manual, Section 4292.
- The Receiving Officer should make copies of both sides of the Pre-Registration form and provide it to Casework Services.
- Once the clerical staff receives a copy of the Pre-Registration forms they should place the Pre-Registration form in the legal section of the field file and mail a copy to Intake and Court Services.

## Finding 2

- The parole agent III should review the ward's field file upon arrival to the Institution and during the intake process, to see if there is a copy of the Pre-Registration form (DOJ BCII-5) filed in the legal section of the field file. If there is not a copy, the parole agent III will have the appropriate staff complete the form.
- The parole agent III should develop written procedures on how to complete the Pre-Registration form, if there is not a copy in the field file.
- The casework services section supervisor should develop a tracking form ensuring compliance according to the I&C Manual, Section 4292.
- The parole agent III should develop a form to document that each step of the PC 290 registration process is reviewed with the ward to ensure compliance with the I&C Manual, Section 4292.
- Include in the DWNYCF Operations Manual, Section 7150, procedures for processing the Pre-Registration form, to obtain compliance with the I&C Manual, Section 4292.
- The parole agent III should develop written procedures for processing the Change of Address form.
- DWNYCF should include a written procedure for processing the Change of Address form In the DWNYCF Operations Manual, Section 7150, to ensure compliance with I&C Manual, Section 4292.
- Provide standardized training on PC 290 registration requirements to youth correctional counselors, parole agents, casework specialists, treatment team supervisors, supervising casework specialists, and all clerical support staff.
- Bring all field files of wards that are PC 290 registrants into compliance, according to the I&C Manual, Section 4292.
- The parole agent/casework specialist should ensure all wards receive a copy of the Notice of Sex Offender Registration Requirement form.
- The parole agent III should ensure all staff members are following the I&C Manual as it pertains to Sections 4292 and 4295.